

**CITY OF ST. LOUIS  
MINORITY AND WOMEN'S BUSINESS ENTERPRISE PROGRAM**

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**CERTIFICATION AND COMPLIANCE RULES**

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**ISSUED BY THE CITY OF ST. LOUIS M/W/DBE PROGRAM OFFICE**

**AND APPROVED BY THE**

**ST. LOUIS DEVELOPMENT CORPORATION**

**SEPTEMBER 15, 2011**

**CITY OF ST. LOUIS**  
**MINORITY AND WOMEN’S BUSINESS ENTERPRISE PROGRAM**

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## **EXHIBITS**

- Exhibit 1: Abbreviated Application
- Exhibit 1A: DBE/ACDBE No Change Affidavit
- Exhibit 2: MRCC Member Agency M/WBE Release
- Exhibit 3: M/WBE Certification Approval Letter
- Exhibit 4: Request for Area of Expertise Review
- Exhibit 5: Standard Application
- Exhibit 5A: Uniform Certification Application and Instructions
- Exhibit 6: M/WBE No Change Affidavit
- Exhibit 7: Five Year M/WBE Renewal Application
- Exhibit 8: Suggested Letter of Intent Form
- Exhibit 9: M/WBE Utilization Plan
- Exhibit 9A: Application for Waiver
- Exhibit 10: Record of Payments to Subcontractors
- Exhibit 11: Monthly M/WBE Utilization Report
- Exhibit 12: Final Record of Payments Report
- Exhibit 12A: Final Utilization Report

## **PART I: PURPOSES, DEFINITIONS, AND GENERAL REQUIREMENTS**

### **A. Goals of the Program.**

The goals of the City of St. Louis Minority and Women's Business Enterprise Program (the "Program"), pursuant to Executive Order #28 as Amended (the "Order"), are the following:

1. to maximize opportunities for the legitimate participation of legitimate Minority and Women's Business Enterprises ("MBEs, WBEs or M/WBEs") in contracting opportunities made available by City of St. Louis funding and/or other incentives ("City Contracting Opportunities"); and
2. to foster positive relationships between M/WBEs and other businesses that lead to long-term opportunities for M/WBE success in both the public and private sectors.

### **B. Objectives of These Rules.**

The objectives of these Rules are the following: (a) to set forth eligibility standards for certification of business entities as MBEs and/or WBEs; (b) to set forth the process for determining when such eligibility standards have been met; (c) to set forth standards for compliance with MBE and WBE participation goals set forth in the Order; (d) to set forth standard processes for monitoring compliance with the Order; (e) to set forth standards for certification and compliance approvals, denials, penalties, and removal of eligibility; and (f) to set forth the administrative appeals process.

These Rules are intended to maximize the "user-friendliness" of the certification process while ensuring that only legitimate minority and women's business enterprises are certified as such, and to maximize the "user-friendliness" of the compliance monitoring process while ensuring that entities participating in City Contracting Opportunities fulfill their responsibilities pursuant to their representations and the Order.

### **C. Definitions.**

1. **Abbreviated Application:** As an alternative to submitting a Standard Application for M/WBE certification, applicants currently certified as a DBE by a Missouri Regional Certification Committee ("MRCC") pursuant to 49 CFR 26 may apply for M/WBE certification by submitting an abbreviated application, a copy of the complete file maintained by the MRCC agency providing the DBE certification, a release of information and a No Change Affidavit as detailed below.

2. **Administrative Review Officer:** A person whose duty is to adjudicate administrative appeals of decisions made by the Authority or Program Review Committee.
3. **Affiliate:** Any person or firm (“concern”) submitting an application for certification, application for renewal, or a No Change Affidavit to the Program Office for determination of eligibility as an M/WBE, when such concern, either directly or indirectly, meets the following conditions, as further detailed in Section II.E.15 of these Rules:
  - a. one concern controls or has the power to control the other;
  - b. a third party or parties controls or has the power to control both concerns;
  - c. a separate concern controls or has the power to control the applicant concern’s monetary decisionmaking; or
  - d. an identity of interest exists between or among parties such that a reasonable person would conclude that affiliation exists.
4. **Airport Assistant Director Community Programs (Director):** The person charged with a) managing and operating the overall Program and b) making decisions for the Program.
5. **Applicant:** The firm submitting an Application for M/WBE certification or renewal or a No Change Affidavit with the City of St. Louis M/WBE Program (the “Program”).
6. **Application:** The submission of a Standard Application or an Abbreviated Application.
7. **Area of Expertise:** A clear, specific and detailed description of the business type and type(s) of work the firm is certified to perform that can be counted toward MBE or WBE participation goals.
8. **Authority:** The entity selected by the St. Louis Development Corporation to manage the Program.
9. **Business Type:** For the purposes of area of expertise assignment and counting, a prime contractor, subcontractor, consultant, supplier, manufacturer, service contractor, concession contractor, or joint venture.
10. **Certification:** A determination by the Program Review Committee (PRC) that a concern is a legitimate Minority and/or Women’s Business Enterprise. The PRC may make such determination either through the Standard Application process or via the Abbreviated Application process specified in these Rules.

11. **Certification Analyst:** A person, firm, and/or consultant designated by the Authority, who is responsible for conducting the M/WBE certification review process and making a preliminary recommendation to the Authority with respect to whether Certification is appropriate.
12. **Certification Approval Letter:** The written document evidencing Certification and the firm's area(s) of expertise.
13. **Certification Manager:** A person, designated by the Authority, who is responsible for a) managing the certification portion of the Program; b) reviewing the work and certification recommendations of the Certification Analysts; c) making M/WBE certification decisions in the Director's absence; and d) presenting recommendations concerning M/WBE certification to the Program Review Committee.
14. **City:** The government of the City of St. Louis, Missouri.
15. **City Contracting Opportunity:** A "City Contracting Opportunity" exists for purposes of these Rules when an agency, department, division of the City or other entity covered by the Mayor's Executive Order intends to enter into a contract or agreement covered by the Mayor's Executive Order, pursuant to which the City pays a contractor to perform Work or pursuant to which the City provides incentives to a contractor to achieve particular public purposes. For purposes of these rules, both types of contracts and contractors are referred to as "Contracts" and "Contractors".
16. **Commercially Useful Function:** An M/WBE is considered to perform a commercially useful function when it is responsible for executing a distinct element of the Work and carries out its responsibilities by actually performing, managing, and supervising the Work involved based on an evaluation of the amount of work subcontracted, industry practices, and other relevant factors, as further detailed herein.
17. **Compliance:** A determination by the Program that a Utilization Plan for MBE and WBE participation in a particular contract is in compliance with these Rules and that the proposed contractor has otherwise complied with these Rules.
18. **Compliance Officer:** A person, designated by the Authority, who is responsible for managing the Compliance portion of the Program and approving an M/WBE Utilization Plan as being in Compliance.
19. **Construction Contract:** An agreement for the performance of construction Work pursuant to architectural and/or engineering plans and/or specifications and/or scopes of work.

20. **Contract:** An agreement executed by a Contractor and a City Contracting Agency for the performance of Work of any type.
21. **Contracting Agency:** Any City agency or department posting, making, and/or managing a City Contracting Opportunity.
22. **Contractor:** An entity executing or intending to execute the Contract with a City Contracting Agency.
21. **Deputy Director of Finance and Administration:** The person overseeing the position of Airport Assistant Director Community Programs and the person with authority to act in the Director's absence.
22. **Disadvantaged Business Enterprise (DBE):** A for-profit small business concern defined by 49 C.F.R. Part 26 for the purpose of projects where applicable U.S. Department of Transportation funds are expended.
23. **Goals:** 25% Minority-Owned Business Participation and 5% Women-Owned Business Participation, or such other numerical percentages as are subsequently issued by ordinance or by an Executive Order of the Mayor.
24. **Good Faith Efforts:** Demonstrated efforts to achieve the Goals which by the type, scope, intensity, and appropriateness of the efforts can reasonably be expected to achieve the Goals to the maximum possible extent, as further detailed in Part III of these Rules.
25. **Immediate Family Member:** Father, mother, husband, wife, domestic partner, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, mother-in-law, or father-in-law.
26. **Joint Venture:** A contractual relationship between an M/WBE firm and one or more other firms to carry out a single, for-profit business enterprise, for which the parties combine their property, capital, efforts, skills and knowledge, and in which the M/WBE is responsible for a distinct, clearly defined portion of the work of the contract and whose share in the capital contribution, control, management, risks and profits of the joint venture are commensurate with its ownership interest, as further detailed herein.
27. **Local Firm:** A business entity authorized to do business in the State of Missouri that maintains a facility within the St. Louis Metropolitan Statistical Area with adequate personnel, equipment, materials and facilities to perform its local work in the area(s) of expertise designated in the Utilization Plan.
28. **Mayor's Executive Order or "Order":** Mayor's Executive Order #28, Minority and Women Owned Business Participation on City Contracts, dated July 24, 1997, as has been or may be extended and/or amended from time to time.



29. **Minority Business Enterprise (“MBE”):** A sole proprietorship, partnership, limited liability company, or corporation owned, operated and controlled by Minority Group Members who (a) have at least 51% ownership of the business entity; (b) maintain day-to-day operational and managerial control of the business entity; and (c) have interest in capital and earnings commensurate with the Minority Group Member(s)’ percentage of ownership. For purposes of these Rules, the MBE firm must be a Local Firm, certified as an MBE by the Program Review Committee.
30. **M/WBE or M/WBEs:** Collectively, one or more Minority Business Enterprise(s) and/or Women’s Business Enterprise(s).
31. **Minority Group Members:** Persons who:
- a. Have origins in any of the Black racial groups of Africa (“Black or African Americans”);
  - b. Have origins in any of the Spanish or Portuguese-speaking peoples of Latin America, regardless of race (“Hispanic Americans”);
  - c. Have origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands (“Asian Americans”); or
  - d. Maintain cultural identification through tribal affiliation or community recognition with any of the original peoples of the North American continent and who demonstrate at least one-quarter descent from such groups (“Native Americans”) as evidenced by a tribal enrollment card recognized by the Federal Bureau of Indian Affairs.
32. **Missouri Regional Certification Committee (“MRCC”):** The five agencies in Missouri that receive direct U.S. Department of Transportation Funds and currently operate DBE programs pursuant to the U.S. Department of Transportation DBE program, including the Missouri Department of Transportation, Bi-State Development Agency of the Missouri-Illinois Metropolitan District (Metro), the City of St. Louis, the City of Kansas City, and the Kansas City Area Transit Authority.
33. **North American Industry Classification System (NAICS):** For the purpose of DBE certification, the six digit numerical code assigned to identify the primary business activity of a firm.
34. **The Order:** Executive Order 28, as amended, relating to Minority and Women-Owned Business Participation on City Contracts.
35. **Principal Local Place of Business:** The business location within the St. Louis MSA where the individuals who manage the firm’s day-to-day operations spend

most working hours and where management's business records with respect to local contracts are kept.

36. **Program Review Committee ("PRC"):** A committee formed by the St. Louis Development Corporation for the purpose of a) determining whether an application for M/WBE certification should be approved or denied; b) determining whether to remove a firm's M/WBE eligibility; and c) determining whether to impose penalties.
37. **St. Louis Development Corporation ("SLDC"):** The Missouri not-for-profit corporation charged with overall responsibility for the administration and enforcement of Executive Order 28.
38. **St. Louis Metropolitan Statistical Area ("SLMSA"):** The area comprised of the City of St. Louis, the Missouri counties of St. Louis, Jefferson, Lincoln, St. Charles, Warren, Washington, and Franklin, and the entire City of Sullivan (including the portion located in Crawford County) and the Illinois counties of Bond, Calhoun, Clinton, Jersey, Macoupin, Madison, Monroe, and St. Clair.
39. **Standard Application:** Application for M/WBE certification pursuant to Part II.A.1.a and II.C through F of these Rules.
40. **Uniform Application:** Application for M/W/DBE certification pursuant to Part II.A.1.b and II.C through F of these Rules.
41. **Utilization Plan Acceptance Letter:** The written document evidencing that the Authority has approved a Utilization Plan for a City Contracting Opportunity.
42. **Women's Business Enterprise ("WBE"):** A sole proprietorship, partnership, limited liability company, or corporation owned, operated and controlled by one or more Women who (a) have at least 51% ownership of the business entity; (b) maintain day-to-day operational and managerial control of the business entity; and (c) have an interest in capital and earnings commensurate with Women's percentage of ownership. For purposes of these Rules, the WBE firm must be a Local Firm, certified as a WBE by the Program Review Committee.
43. **Work:** The performance of tasks, which tasks may include the provision of materials and/or supplies or the variety of tasks involved in a development project, required to fulfill the objectives of a Contract.

#### **D. Implementation.**

1. These Rules were adopted by SLDC pursuant to the Order by Resolution No. 11-SLDC-508, designating the Airport DBE Program Office as the Authority pursuant to these Rules and authorizing and directing such designated Authority to implement the Program pursuant to these Rules, on the date first above written.

2. These Rules shall be effective as of the date first above written as to all aspects of the Program.
3. The Authority may, from time to time, promulgate guidelines and interpretation necessary to carry out these Rules.

**E. Severability.**

All sections of these Rules shall be severable. In the event that any section of these Rules is found by a court of competent jurisdiction to be unconstitutional or unlawful, the remaining sections of these Rules shall be valid unless the court finds the valid sections of these Rules are so essentially and inseparably connected with and so dependent upon the void section that it cannot be presumed that the valid sections could have been promulgated without the void one, or unless the court finds that the valid sections, standing alone, are incomplete and incapable of being executed in accordance with the intent of the Order.

**F. Disclaimers.**

The City, SLDC, the Authority, and the Program disclaim any and all responsibility for the quality of work to be or previously performed by any M/WBE, and for any representations as to the quality, experience, capabilities or qualifications of any M/WBE. Further, the City, SLDC and the Program expressly do not promise, imply or otherwise represent that any M/WBE shall receive any contracts whatsoever based solely on Certification.

The City, SLDC, the Authority, and the Program reserve the rights to, from time to time, modify these Rules, the Application forms and any other forms referenced in these Rules.

**G. Failure to Provide Information.**

All Applicants, M/WBEs and contractors shall provide information reasonably requested in accordance with this Rules in any applications made pursuant to these Rules for certification, renewal, annual updates and/or compliance. The Program shall, pursuant to and in accordance with these Rules, be entitled to withhold any approvals requested by any Applicant, M/WBE, as applicable, and/or contractor for failure to provide such information. "Reasonably requested" shall mean requested within the time frames set forth in these Rules and requests for information required by these Rules.

**H. Compliance with Other Laws.**

All City contractors, subcontractors, and M/WBEs, as applicable, must comply with all relevant federal, state, and local laws in addition to these Rules and the Order, including, but not limited to Missouri Immigration Law found at §285.525 et seq.

#### **I. M/WBE Directory**

The Authority shall, at a minimum, maintain, make available to interested persons, and post on the Authority's Internet website a directory listing all MBEs and WBEs that the Authority deems to be certified. Each listing shall include the certified entity's address, telephone number, contact person name, contact person's telephone number and e-mail address, website (if known), and the area(s) of expertise in which the firm has been certified to perform as an M/WBE. The Program shall update the directory within thirty (30) days following the MBE or WBE's Certification or re-Certification. The Program shall update the directory within ten (10) days following a PRC decision to remove a firm's M/WBE eligibility. M/WBE participation will be counted according to the M/WBE's area(s) of expertise listed in the M/WBE directory.

#### **J. Computation of Time.**

Unless specified otherwise by these Rules, the first day of the designated period of time is not to be counted. The last day of the period of time is to be counted, unless it is a Saturday, Sunday, or a legal holiday under the laws of the City of St. Louis.

#### **K. Notice**

All M/WBEs, M/WBE applicants and contractors must report changes of contact information, including physical address, mailing address, telephone numbers, fax numbers and e-mail addresses within thirty (30) days of such change. Any notice required by these Rules will be deemed received if sent to the last address of record provided to the Authority.

## **PART II: CERTIFICATION**

### **A. Certification Options.**

A business entity may be certified as an MBE and/or a WBE for participation in City Contracting Opportunities in any of the following ways:

#### **1. Certification by Standard Application.**

- a. Business entities seeking only M/WBE certification may elect to apply for certification through a Standard Application (attached as Exhibit 5). If a business entity submits a Standard Application for M/WBE Certification to the City of St. Louis, the applicant must prove eligibility pursuant to Part II.C through F of these Rules. In order for an Applicant business entity to be certified as an MBE and/or WBE, as applicable, the Program must determine that both ownership of the Applicant business entity and control of the Applicant business entity rest with Minority Group Member(s) and/or Women, as applicable to the type of Certification requested. Section C describes the Standard Application Process and Sections D through F provide the standards the Certification Analyst must use to determine eligibility.
- b. Business entities seeking M/WBE and DBE certification may elect to apply for certification through a Uniform Application (attached as Exhibit 5A). The program will then adjudicate the DBE and M/WBE certification separately based on the information provided in the single application. To be certified as a DBE, the firm must establish eligibility pursuant to 49 CFR 26. To be certified as an M/WBE, the applicant must prove eligibility pursuant to Part II.C through F of these Rules. The Application procedures set forth by Part II.C will apply with the exception that the DBE certification processing timeline established by 49 C.F.R. 26 will apply.
  - i. The applicant must indicate it seeks certification as an M/WBE, as applicable, on the DBE application and submit proof that the firm is a local firm with a principal local place of business.
  - ii. If the Authority determines that the Applicant is owned and controlled by Minority Group Members and/or Women, as applicable, and the firm is recommended for certification as a DBE, or would be recommended for DBE certification but for ineligibility due to personal net worth or business size standards, the Authority shall recommend to the Program Review Committee that the firm be certified as an MBE and/or WBE, as applicable.

2. **Certification by Abbreviated Application.** Business entities currently certified as DBEs through a MRCC DBE certifying agency pursuant to 49 CFR 26 may elect to apply for M/WBE certification through an Abbreviated Application as an alternative to submitting a Standard Application for M/WBE certification. If a business entity submits an application for M/WBE certification via an Abbreviated Application, the applicant must prove eligibility pursuant to Part II.B. of these Rules.

## **B. Abbreviated Application Procedures.**

1. **Applicability.** Except as provided herein, if a business entity elects to make application for MBE and/or WBE certification through an Abbreviated Application, Part II.C, Part II.D, and Part II.E, Part II.F.3 of these Rules shall not apply to the M/WBE certification decision unless otherwise specified herein or unless the Applicant also elects to submit a Standard Application. Under the Abbreviated Application option, only Applicants that are minority and/or women owned Local Firms are eligible for Certification. An M/WBE firm certified pursuant to an Abbreviated Application as set forth in this Section II.B shall retain M/WBE certification as long as the firm remains a local firm, remains in active good standing with the initial DBE certifying agency, and complies with the compliance provisions of Parts II.B and III of these Rules
2. **Application.** Applicants may apply for M/WBE certification by submitting an abbreviated application, a copy of the complete DBE file maintained by the MRCC agency providing the DBE certification, a signed MRCC Member Agency M/WBE release of information, and a DBE affidavit of no change (attached as Exhibits 1, 1A and 2).
  - a. The Authority will complete a preliminary review of the abbreviated application and DBE file within 15 calendar days of receipt of both the application and DBE file.
  - b. If the application is not complete, the Authority will send a notice to the applicant to submit the requested information within 10 calendar days of receipt of the notice. If no response is received, the Authority will send a final notice to the applicant to submit the requested information within 5 calendar days of receipt of the final notice. If no response is received, the Authority will present the application with a recommendation to deny certification to the PRC.
  - c. If the application is complete within the required timeframe, the Authority will conduct a full review of the application and the copy of the applicant's DBE file. A site visit may be conducted by the Authority, depending on the age of the last site visit by the MRCC member agency managing the DBE file, any history of DBE violations or citations, discrepancies in the application, and discrepancies in the DBE file.

**3. Certification Decisions.** The Authority will recommend approval or denial of the application to the PRC in accordance with Part IV of these Rules.

**a. Approval.** If the Program Review Committee finds that the requirements set forth herein have been met, the Certification Manager shall prepare an M/WBE Certification Approval Letter on the form attached hereto as Exhibit 3, obtain the Director's signature on such Letter, issue the Letter to the Applicant, and update the online directory to include the Applicant.

**b. Denial.**

i. The Authority will present the application with a recommendation to deny certification to the PRC if the applicant is not responsive to the Authority's requests for information by the timeframe set forth above.

ii. The Authority shall recommend denial of applications where the Applicant fails to provide proof that the Applicant is owned and controlled by Minority Group Members and/or Women, as applicable, or where the applicant is not a Local Firm or where the Applicant is not certified as a DBE by a MRCC member agency.

iii. If an Applicant requests but does not receive MBE and/or WBE Certification through the Abbreviated Application process, the Applicant may proceed to request M/WBE Certification pursuant to the Standard Application process.

**4. Maintaining Certification.**

a. Certified firms must comply with all applicable DBE program rules and remain in good standing with the MRCC agency managing the firm's DBE certification.

b. Certified firms must send the Authority a copy of the annual No Change Affidavit submitted to the MRCC member agency managing the firm's DBE certification. Certified firms must also submit a contact update annually to the Authority.

c. Firms certified via an Abbreviated Application must inform the Authority of the following information within 30 days:

i. Changes to a firm's contact information, including physical address, mailing address, telephone numbers, fax numbers and e-mail addresses and/or any other changes affecting the firm's ability to meet the definition of a Local Firm;

- ii. Changes to ownership and/or control by minority group members and/or women, as applicable;
  - iii. Removal of eligibility proceedings initiated by the MRCC member agency which provided the DBE underlying certification; and
  - iv. **Loss of certification from the MRCC member agency which provided the underlying DBE certification, as applicable.** If loss of certification as a DBE is due solely to changes in the firm's finances that render the firm ineligible as a DBE, such loss of certification shall have no impact on the firm's certification as a MBE or WBE, and the Program shall assume responsibility for recertification as an MBE or WBE and Part II.C through F of these Rules will thereafter apply. If loss of DBE certification is for any other reason, the Authority may initiate removal of eligibility proceedings by presenting such complaint to the PRC for review and decision.
- d. The Authority reserves the right to independently and periodically verify DBE certification status with the certifying MRCC member agency's DBE program.
  - e. The Authority reserves the right to independently and periodically verify that the firm is a local firm.
  - f. **Area(s) of Expertise.**
    - i. New M/WBE firms will be assigned the area(s) of expertise approved by the MRCC member agency which provided the underlying DBE certification.
    - ii. Requests for changes in areas of expertise shall be considered and granted when the M/WBE has either 1) achieved successful completion of types of Work in addition to those listed in the areas of expertise or 2) acquired additional expertise via the hiring of staff experienced in such additional areas of expertise. The M/WBE shall submit a request for Area of Expertise Review in the form attached hereto as Exhibit 4, together with supporting evidence to demonstrate that the MBE and/or WBE has the ability to manage and control Work in the additional area(s) of expertise.

### **C. Standard/Uniform Application Procedures.**

- 1. **Applicability.** The rules contained herein apply to firms seeking M/WBE certification through the submission of a Standard Application and a Uniform Application with the exception that the DBE certification processing timeline established by 49 C.F.R. 26 will apply to Uniform Applications. These rules do



not apply to firms seeking certification through the abbreviated certification process described in Part II.B unless specified therein.

**2. Application Materials.** A business entity must submit a complete M/WBE Standard Application on forms provided by the Authority, together with supporting documentation to the Authority to be considered for Certification.

- a. Only one business entity may apply for Certification in each Application.
- b. As a part of the Application, the Applicant must attest to the accuracy and truthfulness of the information provided on the application form and in the supporting documentation, in the form of an affidavit sworn to by the Applicant before a person who is authorized by state law to administer such oaths.
- c. Applicants must specify the area(s) of expertise for which certification is requested. Applicants must provide supporting evidence to demonstrate that the MBE and/or WBE has the ability to manage and control Work in the area(s) of expertise for which certification is requested.
- d. Applicants must submit supporting documentation to demonstrate eligibility pursuant to Part II.C through F of these Rules.

**3. Preliminary Application Review.**

- a. The Authority shall advise each applicant within 15 days from receipt of the application whether the application is complete and suitable for evaluation.
- b. If the Authority determines that the application is not complete, the Authority shall prepare and mail a letter to the Applicant detailing the information needed to complete the application.
- c. The Applicant shall have ten (10) days from receipt of the letter to submit the requested information.
- d. If the Applicant fails to respond, the Authority shall issue a reminder notice to the Applicant regarding the information needed. The notice shall also advise the Applicant that failure to submit the required information or otherwise respond to the letter within five (5) days after the date the letter is received shall result in the application being deemed “abandoned” and placed in inactive status.
- e. If the Applicant fails to submit a complete application after receiving notice that the application is not complete and an has had an opportunity to submit documents necessary to complete the application, the application will be

deemed abandoned but maintained on file for a period of one (1) year from the date of the letter referenced in “b” above.

- 4. Review of Completed Applications.** Within sixty (60) days of the later of the Authority’s receipt of an Application or any supplemental information requested pursuant to paragraph C.3. above, a Certification Analyst shall complete a review of the Applicant’s application to determine whether the Applicant meets the standards established in these rules for ownership and control by Minority Group Members and/or Women, as applicable, pursuant to the type of Certification sought by the Applicant. The Certification Analyst’s review of an application shall include applicant interviews, review of additional requested documents, qualifications, site visits, analysis of ownership, finances, business history, experience, expertise, equipment, firm operations, and any other action reasonably necessary to ensure only qualified applicants are recommended for certification.
- 5. Report and Recommendation.** Upon completion of the review process and within the 60-day time frame specified above, the Certification Analyst shall prepare a report detailing the results of the review and shall prepare a recommendation as to whether the Applicant should receive Certification as an MBE or WBE, as applicable. If the Certification Analyst recommends that the Applicant’s Certification request be denied, the Certification Analyst’s report shall contain specific reasons for such recommendation, supported by facts elicited as a part of the review. The Authority shall review the report and make such changes in the report as it deems appropriate, and shall, within ten (10) days of receipt of the report from the Certification Analyst, submit such report to the Program Review Committee and applicant in accordance with Part IV below, together with the Authority’s recommendation for approval or denial of the Application, the Application, and all supporting documentation.
- 6. Withdrawal of Application.** Except as otherwise provided in this paragraph, if an applicant for M/WBE certification withdraws its application before the PRC has issued a decision on the application, the applicant can resubmit the application at any time. However, the Authority may place the reapplication behind other applications that have been made since the firm’s previous application was withdrawn. The Authority may apply a six (6) month waiting period to a firm that has established a pattern of frequently withdrawing applications before submitting the application to the PRC for a decision if the Authority provides notice to the applicant of the reasons for imposing a waiting period.
- 7. PRC Decision.** The Program Review Committee (“PRC”) shall review the materials submitted by the Authority and shall conduct proceedings and render a decision as to whether the Applicant shall be certified as an MBE and/or WBE, as applicable, pursuant to Part IV hereof.

- a. **Certification.** If the PRC decision is to certify the Applicant, the Authority shall prepare the Certification Approval Letter on the form attached hereto as Exhibit 3, as amended, obtain the Director's signature on such Letter, issue the Letter to the Applicant, and update the online Directory to include the Applicant.

b. **Denial of Certification.**

- i. If the PRC decision is to deny certification, the Authority shall provide the the Applicant with written notice containing the following applicable provisions:

- A) the Applicant must be informed of the reasons for denial;
- B) the Authority may provide the Applicant with a description of the actions, if any, that can be taken by the Applicant to cure the circumstances resulting in denial;
- C) the Applicant must be informed that it may cure the deficiencies which resulted in denial if sufficient evidence is submitted to the authority within 60-days of receiving notice of the PRC's decision to deny certification;
- D) the Applicant will be prohibited from re-applying until a period of six (6) months from the date the Applicant originally submitted an application have elapsed unless the Applicant submits evidence to cure the deficiencies within the timeframe listed above or appeals such denial as provided below.

- ii. The applicant may cure the deficiencies which resulted in denial by submitting evidence of such cure within 60 days of receiving notice of the PRC's decision to deny certification. If the Applicant submits evidence of such cure within the applicable timeframe, the Authority shall review such evidence and make a recommendation to the PRC certification in accordance with Section C.4 above.

**8. Material Changes—Notices Required During Application Process and Following Certification.** Applicants with pending applications and certified M/WBEs must notify the Program in writing within 30 days of any material changes in the business entity. Such notification must take the form of an affidavit sworn to by the applicant or certified M/WBE before a person who is authorized by state law to administer oaths. Material changes requiring such notification are as follows:

- a. Changes in circumstances affecting management, ownership, or control by Minority Group Members and/or Women, as applicable, including changes to

any ownership, management or control information provided in the application materials and regardless of whether the change involves Minority Group Members and/or Women, as applicable, or individuals who are not so qualified;

- b. Changes to a firm's contact information, including physical address, mailing address, telephone numbers, fax numbers and e-mail addresses and/or any other changes affecting the firm's ability to meet the definition of a Local Firm

**9. Annual No-Change Affidavit Required.** Certified M/WBEs must annually submit an M/WBE No Change Affidavit to the Program, in the form attached as Exhibit 6, affirming that there have been no material changes in the certified business entity since Certification was granted, except those for which the M/WBE has provided notification to the Program pursuant to paragraph 6 above.

- a. The Authority shall inform the M/WBE of the Annual No-Change Affidavit requirement at least thirty (30) days prior to the anniversary date and shall include the necessary form with the reminder notice.
- b. The M/WBE shall submit the Annual No-Change Affidavit no sooner than the anniversary date and no later than thirty (30) days after the anniversary date.
- c. If the M/WBE fails to submit the Annual No-Change Affidavit within the applicable timeframe, the Authority shall send a reminder notice advising the M/WBE that failure to submit the Annual No-Change Affidavit within fifteen (15) days of receipt of the reminder notice will result in the Authority's recommendation to remove the firm's M/WBE eligibility.

**10. Five-Year Renewal Required.** Once a business entity has been certified as an MBE and/or WBE, the business entity shall remain certified for a period of five (5) years following the date of Certification unless and until eligibility has been removed as provided in these Rules. A minimum of ninety (90) days prior to the expiration of the five-year period, the Authority shall, in writing, remind the MBE and/or WBE of the renewal requirement and the deadline for submitting the renewal application, and shall include the necessary renewal application forms with the reminder notice. The renewal application shall be on the form attached hereto as Exhibit 7 and must be submitted, together with all accompanying documentation listed on the form, by the Applicant within thirty (30) days of receipt of the notice. Upon receipt of the renewal application, the Certification Manager shall review the application to determine whether the business entity continues to be eligible for Certification pursuant to these Rules. The renewal application review shall include both a review of documentation and a site visit to the business entity's Local Place of Business. Based on such review, the Director shall determine whether to renew certification. If the Director determines, based on such review, that a business entity is no longer eligible for Certification, the

Director shall forward the renewal application and a report detailing the Director's recommendation and the reasons therefor to the PRC for review and final decision.

If an MBE and/or WBE fails to submit a renewal application and supporting documentation during the time frame specified in the reminder notice, the Program shall issue a second reminder notice, sent by certified registered mail. If the MBE and/or WBE fails to submit a renewal application in response to such second reminder notice before the expiration of the five-year Certification period, the business entity's MBE and/or WBE certification shall lapse as of the fifth anniversary of Certification.

**11. Changes in Area(s) of Expertise for which Certification Has Been Granted.**

All areas of expertise for which an MBE and/or WBE has been certified will be reviewed in conjunction with the five-year renewal application to determine whether the MBE and/or WBE continues to possess the ability to perform Work in those areas of expertise included in the original Certification or as have been subsequently amended. In conjunction with the five-year renewal application or at any time during the five-year certification period, the MBE and/or WBE may request that other areas of expertise be added to its Certification as discussed in Part II.E.13. To become certified in an additional area of expertise outside of the five-year renewal process, the M/WBE shall submit a request for Area of Expertise Review in the form attached hereto as Exhibit 4, together with supporting evidence to demonstrate that the MBE and/or WBE has the ability to manage and control Work in the additional area(s) of expertise.

**D. Ownership.**

In order to be eligible for Certification, a minimum of 51% of an Applicant must be owned by Minority Group Member(s) or Women, as applicable.

**1. Minority or Women Group Membership.**

- a. There shall be a rebuttable presumption that a person is claiming to be a Minority Group Member and/or a Woman is a qualified minority or woman. In order for such person's participation in an Applicant to be taken into consideration in evaluating a Certification Application, each such person shall submit a signed, notarized statement attesting that such person meets the applicable definition as set forth in these Rules.
- b. The Program may require evidence that the minority and/or woman owner has held him/herself out to be a member of the group over a long period of time prior to application for certification and that the person is regarded as a member of the group by the relevant community if a determination is made that a well founded reason exists to question the person's claim to membership of that group.

2. **Majority Ownership and Permitted Forms of Ownership.** The minority and/or woman must maintain majority ownership of a sole proprietorship, corporation, partnership, or LLC as evidenced, as applicable, by registration with the Missouri Secretary of State, stock certificates, partnership agreements, or corporate documents.
3. **Real, Substantial and Continuing Ownership.** The business entity's ownership by Minority Group Members and/or Women, as applicable, must be real, substantial, and continuing, going beyond pro forma ownership of the firm as reflected in ownership documents. The minority and/or woman owners must enjoy the customary benefits of ownership and share in the risks and profits commensurate with their ownership interests, as demonstrated by the substance, not merely the form, of the firm's arrangements.
4. **Securities.** All securities and/or assets that constitute ownership of a business entity by Minority Group Members and/or Women, as applicable, shall be held directly by Minority Group Members and/or Women, as applicable.
5. **Capitalization Required.** Minority Group Member(s) and/or Women, as applicable, must have capitalized the business entity in proportion to their percentages of ownership. Contributions of capital by the Minority Group Member and/or Woman owners, as applicable, used to acquire ownership interests must be real and substantial.

#### **E. Control.**

In order to be eligible for Certification, an Applicant must be controlled by Minority Group Member(s) or Women, as applicable.

1. **Independence.** Only independent business entities are eligible for Certification as MBEs and/or WBEs. An Applicant shall be deemed to be independent business entity if the viability of the business entity does not depend on its relationship with one or more other business entities.
2. **Restrictions on Decision-Making Authority.** An Applicant shall not be subject to any formal or informal restrictions that limit the customary discretion of a business entity.
3. **Management Authority.** The Minority Group Members and/or Women, as applicable, must possess the power to direct or cause the direction of the management and policies of the business entity and to make day-to-day as well as long-term decisions for the business entity on matters of management, policy and operations. A Minority Group Member and/or Woman, as applicable, must hold the highest position in the business entity (e.g., chief executive officer, president, partner, majority managing member).

4. **Non-Minority/Non-Women Involvement.** Individuals who are not Minority Group Members and/or Women may be involved in the Applicant as owners, managers, employees, stockholders, officers, and/or directors, provided, however, that such non-qualifying individuals must not possess or exercise the power to control the business entity or be disproportionately responsible for the operation of the business entity.
5. **Delegation.** The Minority Group Members and/or Women owners of the business entity may delegate various aspects of the management, policymaking, or daily operations of the firm to other participants in the business entity, regardless of whether these participants are Minority Group Members and/or Women. Such delegations of authority must be revocable, and Minority Group Members and/or Women owners must retain the power to hire and fire any person to whom such authority is delegated.
6. **Immediate Family Members.** A Minority Group Member and/or Woman, as applicable, may control a business entity even though one or more of the individual's immediate family members who themselves are not Minority Group Members and/or Women, as applicable, participate in the business entity as a manager, employee, owner, or in another capacity. The Minority Group Member and/or Woman, as applicable, owner(s) must maintain control over other persons involved in the business entity without regard to whether or not the other persons are immediate family members.
7. **Transfers of Control.** Where a business entity was formerly owned and/or controlled by a non-Minority Group Member and/or non-Woman, as applicable, whether or not an immediate family member, and ownership and/or control were purported to have been transferred to a Minority Group Member and/or Woman, as applicable, and the non-minority and/or woman individual remains involved with the business entity in any capacity, the Minority Group Member and/or Woman, as applicable, currently owning the firm must demonstrate by clear and convincing evidence that:
  - a. The transfer of ownership and/or control to the Minority Group Member and/or Woman, as applicable, was made for reasons other than obtaining Certification; and
  - b. The Minority Group Member and/or Woman, as applicable, actually controls the management, policy, and operations of the business entity, notwithstanding the continuing participation of a non-Minority Group Member and/or non-Woman, as applicable, who formerly owned and/or controlled the business entity.
8. **Managerial Expertise and Competence.** The Minority Group Member and/or Woman owner(s) must have an overall understanding of and managerial and

technical competence and experience directly related to the type of business in which the business entity is engaged and the business entity's operations. The Minority Group Member and/or Women owner(s) is not required to have experience or expertise in every critical area of the business entity's operations, or to have greater experience or expertise in a given field than managers or key employees. However, the Minority Group Members and/or Women owner(s) must demonstrate the ability to intelligently and critically evaluate information presented by other participants in the business entity's principal business activities and to use this information to make independent decisions concerning the business entity's daily operations, management, and policymaking.

**9. Licensing.**

- a. If federal, state or local law requires a person to have a particular license or other credential in order to own and/or control a certain type of firm, then the minority and/or woman who owns and controls a potential M/WBE firm of that type must possess the required license or credential. If federal, state or local law does not require the owner of a business to have such a license or credential to own and/or control a firm, certification will not be denied solely on the grounds that the person lacks the license or credential.
- b. If a license(s) is necessary to perform the tasks associated with the area of expertise the Applicant seeks, the Applicant must employ a sufficient number of licensed personnel to perform work and maintain capacity for the contract size and area of expertise sought.

**10. Remuneration.** The Minority Group Member and/or Woman, as applicable, must receive fair remuneration as compared to the other participants in the business entity in the context of the duties of the persons involved, normal industry practices, the business entity's policy and practice concerning reinvestment of income.

**11. Other Employment.** In order to be viewed as controlling the Applicant, a Minority Group Member and/or Woman, as applicable, cannot engage in outside employment or other business interests that conflict with the management of the Applicant or prevent the individual from devoting sufficient time and attention to the affairs of the Applicant to control its activities. Outside employment or other business interests shall not be a bar to a finding of control if the Minority and/or Woman owner, as applicable, demonstrates continued availability, ability, and opportunity to control the Applicant during absences from the Applicant's place of business if such individuals control a part-time business entity that operates only on evenings and/or weekends, if the individual controls it for the entirety of the time it is operating or can exercise control of the business in other acceptable ways.



**12. Equipment and Other Resources.** As determined by industry practice, the applicant must independently own or lease the equipment necessary to perform its work.

a. Special considerations for M/WBE Trucking Companies.

i. The firm must be responsible for the management and supervision of the entire trucking operation for which it is responsible on contracts, and there cannot be a contrived arrangement for the purpose of meeting M/WBE goals and:

i. own and operate at least one fully licensed, insured and operational truck; or

ii. a MBE may lease a truck(s) from another MBE firm certified by the City, including an owner-operator or a WBE may lease a truck(s) from another WBE firm certified by the City, including an owner-operator; or

C. lease a truck(s) from a non-MBE or non-WBE firm, as applicable including from an owner-operator if it demonstrates it has an executed lease in place between the non-MBE or non-WBE firm, as applicable, to lease the trucks.

**13. Experience and Capacity in the Area of Expertise for which Certification Is Requested.** The applicant must demonstrate the ability to control the firm in the specific type(s) or work in which the firm seeks certification whether on initial certification or upon a request for certification in an additional type of work.

a. To become certified in an additional type of work, the firm need not submit a new application for certification, but the firm must verify the minority and/or woman owner's control of the firm in the additional type of work.

b. The firm's areas of expertise should be described in terms that are specific. Multiple areas of expertise may be assigned where appropriate.

c. The firm bears the burden of providing any detailed company information which the Authority needs to make an appropriate area of expertise designation.

d. The Authority is not precluded from changing an area of expertise if there is a factual basis in the record.

**14. Franchises and License Arrangements.** An Applicant operating under a franchise or license agreement may be certified if the Applicant meets the standards set forth in these Rules and the franchiser or licensor is not affiliated

with the franchisee or licensee. In determining whether affiliation exists, the following will generally not be considered as adverse to granting Certification: restraints relating to standardized quality, advertising, accounting format, and other provisions imposed on the franchisee or licensee by the franchise agreement or license, provided that the franchisee or licensee has the right to profit from its efforts and bears the risk of loss commensurate with ownership and provided that affiliation does not exist through other means, such as common management or excessive restrictions on the sale or transfer of the franchise interest or license.

**15. Affiliation.** An Applicant determined to be an Affiliate shall not be eligible for Certification except as provided herein.

- a. Business entities are affiliates of each other when one controls or has the power to control the other, or a third party or parties controls or has the power to control both, regardless of whether or not control is exercised, so long as the power to exercise control exists.
  - i. Examples of affiliation include, but are not limited to, instances where a non-minority or non-woman owned firm controls the Applicant based on future events, common management of firms, the identity of similar interests, organizes a new concern for the purpose of certification, or creates a joint venture other than those permitted in Part III.H. below.
  - ii. If affiliation appears to be at issue, the Authority shall examine the following relationships in determining whether affiliation exists: ownership, management, previous relationships with or ties to another concern, and contractual relationships.
  - iii. In determining whether affiliation exists, the Authority shall consider the totality of the circumstances and may find that the business entity is an Affiliate even though no single factor is sufficient to constitute affiliation.
- b. General Exception: If the business entity that controls the business entity that would otherwise be deemed an Affiliate is certified as a MBE or WBE by the Program, the Affiliate shall be eligible for certification under these Rules.

#### **F. Additional Rules Affecting Certification.**

- 1. Eligibility Based on Present Circumstances.** Except as provided in these Rules, the eligibility of an Applicant for Certification must be evaluated on the basis of present circumstances. An Applicant will not be denied certification based solely on historical information indicating a lack of ownership or control of the Applicant business entity by Minority Group Members or Women, as applicable, at some time in the past, if the Applicant currently meets the ownership and control standards of this part. Except as provided in these Rules, an Applicant will not be denied certification solely on the basis that it is a newly formed

business entity, has not completed projects or contracts at the time of its application, has not yet realized profits from its activities, or has not demonstrated a potential for success. If the firm meets the ownership and control requirements of this Part, the firm is eligible for certification.

2. **Local Firms Only.** Only Applicants that are Local Firms with a principal local place of business are eligible for Certification.
3. **Subsidiaries.** A business entity that is owned by another business entity (rather than individuals), is only eligible for Certification if the following conditions are met:
  - a. Minority Group Members or Women, as applicable, own and control a business entity through a parent company that is a holding company, established for tax, capitalization or other purposes consistent with industry practice, and the Minority Group Members or Women, as applicable, owners of the parent/holding company control the subsidiary through the parent/holding company; and
  - b. Cumulative ownership by Minority Group Members or Women, as applicable, in the subsidiary is at least 51%.
4. **Commercially Useful Function.** Consideration of whether a firm performs a commercially useful function pertains solely to the compliance aspects of these Rules as set forth in Part III. Issues of commercially useful functions will not be considered in any way in making decisions about whether to certify a firm as a MBE/WBE.
5. **History of Attempts to Subvert.** Notwithstanding any of the foregoing, a firm's pattern of conduct in attempts to evade or subvert the intent or requirements of the M/WBE program may be considered in making certification decisions.

#### **G. Third Party Complaints.**

Any person or entity, including a City department or Contracting Agency, may file a written complaint with the Authority alleging that a certified firm is ineligible.

1. The complaint must specify the alleged reasons why the M/WBE firm is ineligible and include any information, arguments, and evidence supporting the complainant's assertion that the firm is ineligible and should not continue to be certified.
2. The Director shall notify the firm against which the complaint was lodged of the complaining and provide such firm with a copy of the complaint, and shall notify the firm that the firm may submit information and documentation to the Director refuting the complaint within fifteen (15) days from receipt of such notification.

3. Within thirty (30) days from receipt of such written complaint, the Authority shall review its records concerning the firm, any material provided by the M/WBE firm and the complainant, and other available information. The Director may request additional information from the firm or conduct any other investigation that it deems necessary.
4. Within such 30-day period, the Authority shall issue to the complainant and to the M/WBE against which the complaint is lodged a written determination of whether or not the complaint was legitimate and whether or not the certification of the subject M/WBE will remain or whether the Authority intends to initiate removal of eligibility proceedings by presenting such complaint to the PRC for review and decision.

### **PART III: COMPLIANCE**

#### **A. Objectives.**

This Part describes the requirements of the Program, the City of St. Louis and contracting parties for compliance with Executive Order 28 relating to Minority and Women's Business Participation in City Contracting Opportunities.

#### **B. M/WBE Participation Goals and Requirements.**

The City's Goals for Minority and Women's Business Participation in City Contracting Opportunities are set forth in the Order. Under no circumstances shall the Goals be construed as quotas or set-asides.

Pursuant to the Order, business entities involved in City Contracting Opportunities are also required to achieve maximum possible utilization of MBEs and WBEs in carrying out the Work.

#### **C. Supply Contracts:** M/WBEs shall be utilized and counted in accordance with the Order.

#### **D. Service and Concession Contracts.**

1. Utilization of certified M/WBEs shall be demonstrated by contract proposers in accordance with the Order.
2. The proposer must ensure that all MBEs and WBEs projected for use have been certified by the City prior to bid opening.
3. The proposer must complete, sign and submit a Utilization Plan to the Authority for review and approval prior to execution of the contract and to the Contracting Agency, if and as required by the Contracting Agency's rules and procedures. The Utilization Plan shall include Letters of Intent to enter into contracts signed by the M/WBE and the general contractor or subcontractor with which such M/WBE shall directly contract, evidencing the intent of the general contractor or subcontractor and the M/WBEs to enter into a contract for work involved in the City Contracting Opportunity, specifying the dollar amount of the contract, and the scope of work to be performed pursuant to the subcontract or sub-subcontract. Such Letters of Intent shall also include a certification by the general contractor or subcontractor and the M/WBE that the M/WBE will perform the entire scope of work and purchase all materials specified in the scope of work with the M/WBE's own human, monetary and other resources. A suggested form of Letter of Intent is attached hereto as Exhibit 8. Contractors are encouraged to meet with the Authority to discuss the proposed Utilization Plan prior to the formal submission of the Utilization Plan.

4. No Contracting Agency shall commence the Contract execution process unless and until such Plan has been submitted to and approved by the Authority.
5. Participation shall be utilized and counted in accordance with the Order.
6. Certification, utilization and counting of joint ventures shall be analyzed according to the Joint Venture provisions set forth below.

#### **E. Public Works Contracts**

1. Bid preparation and submission shall be conducted in accordance with Executive Order 28 as follows:
  - a. For any work to be subcontracted or materials to be supplied, prime contractors shall solicit bids from MBEs and WBEs to the maximum extent possible, referring to the City's Directory as necessary. All firms, including non-MBEs and non-WBEs, should be solicited in the same time period. If a MBE or WBE firm submits the low or equally low bid for work to be subcontracted or materials to be supplied, the prime contractor shall use the MBE or WBE firm unless the bid is non-responsive or the prime contractor is able to document that the MBE or WBE firm is unqualified or otherwise unable to perform the work or supply the needed materials. Where second tier subcontracting is to occur, the same procedure shall be employed for each type of work or materials to be supplied under a second tier subcontract.
  - b. All solicitations shall be made prior to the bid opening and there shall be no negotiation of bids or "bid shopping." Contractors bidding on more than one contract must solicit bids from MBEs and WBEs for each contract for which they are bidding regardless of the proximity of the bid dates or the previous lack of responsiveness of MBEs and WBEs.
  - c. Only firms that have been certified as MBEs or WBEs by the City of St. Louis prior to the bid opening will be counted as such.
  - d. **Bid Submission Requirements.** The bidder shall include with its bid a definitive statement of the minimum percentage of MBE participation and the minimum percentage of WBE participation the bidder commits to achieving in the subcontracting and performance of the Work, on the bid forms prescribed by the Contracting Agency. Contractors are encouraged to meet with the Authority to discuss the appropriate MBE and WBE participation prior to the submission of the bids. The Utilization Plan shall be submitted on the forms attached hereto as Exhibit 9. If projected M/WBE participation is below the goals, the bidder should submit a request for a waiver attached hereto as Exhibit 9A along with the bid.

2. **Bid Opening.** The contracting agency shall notify the Authority of the date and time for the formal bid opening. After the bids have been opened and read, the contracting agency will review the M/WBE Statement, included as part of the bid documents, to determine whether the low bidder intends to meet the MBE and WBE participation goals established by this order. If the low bidder does not meet the specified goals for MBE and WBE participation, the low bidder shall be instructed to request a total or partial waiver of the goals as described below.
3. **Utilization Plan.** Within 48 hours of notification by the Contracting Agency, the bidder named by the Contracting Agency as the apparent successful bidder, and any other bidder still desiring to be considered for the contract award, shall submit to the Contracting Agency the M/WBE Utilization Plan, and any other documents required by the bid documents, including, where appropriate, a request for waiver as described below.
4. **Utilization Plan Review.**
  - a. Prior to the preaward conference, copies of the bid documents will be distributed to the Authority. The Authority will immediately begin a review of the bid documents and, within two weeks following the preaward conference, will make a recommendation as to the apparent low bidder's good faith efforts to meet the city's goals prior to bid opening by reviewing, at a minimum, the bidder's utilization plan and, if submitted, a request for a waiver of the goals.
  - b. In reviewing the Utilization Plan and preparing its review documentation, the Authority may:
    - i. Contact MBEs and WBEs to verify that the apparent low bidder solicited bids from each of them, that the MBE and WBE subcontractor bid amounts listed accurately reflect the amounts actually quoted by those firms and, in the case of those MBE/WBE firms proposed to be utilized by the low bidder, that the apparent low bidder has tentative agreements with them in the amounts shown;
    - ii. For work being subcontracted to non-MBE/WBE firms, the Authority will contact the certified MBE and WBE firms in that particular trade, service or supply area to verify that, after solicitation of bids by the proposed prime contractor, the MBE and WBE firms submitted high or non-responsive bids or no bids at all;
    - iii. Contact M/WBEs and subcontractors to verify and/or obtain clarification of the information provided in the Letters of Intent and confirm that each

M/WBE will perform a Commercially Useful Function in the performance of the Work;

- iv. Seek additional information from the Contractor and/or seek information from the M/WBEs included in the Utilization Plan. If additional information is requested, the Contractor shall have 7 days from receipt of the notice to provide a response. If no response is received within 7 days from receipt of the notice, the Authority shall recommend denial of the contract award to the Contracting Agency.

- c. **Determination as to Utilization Plan Acceptability.** Within three (3) calendar weeks following submission of the Utilization Plan, the Authority shall make a recommendation as to the acceptability of the Plan and communicate that decision to the City Contracting Agency and the Contractor, using the following procedures and criteria:

- i. Based on the information provided and the information obtained from contacts with M/WBEs and subcontractors, the Authority may adjust the participation amounts included in the Utilization Plan in accordance with the counting provisions of Executive Order 28, Section 4.4.
- ii. If the Utilization Plan, as adjusted, demonstrates that the Contractor will meet or exceed the Goals, the Authority shall make a positive recommendation to the contracting agency for contract award to the low bidder.
- iii. If the Utilization Plan, as adjusted, does not demonstrate that the Contractor will meet the goals but the Contractor has:
  - A) submitted a waiver in accordance with the waiver provisions listed below and its Good Faith Efforts documentation indicates that the Contractor has made appropriate and sufficient Good Faith Efforts, the Authority shall make a positive recommendation to the contracting agency for contract award to the low bidder; or
  - B) has not submitted a waiver in accordance with the waiver provisions listed below, the Authority shall recommend that the Contracting Agency require the bidder to submit a waiver request.
- iv. The contracting agency shall not award any contract in excess of \$10,000 without the positive recommendation of the Authority.

- d. **Approved Utilization Plan.** The Authority's participation approval letter and participation worksheet shall be attached to the contract.



- e. **Utilization Plan Compliance Required.** The Contractor shall be responsible for complying with the approved Utilization Plan throughout the execution and duration of the contract and ensure that:
  - i. binding contracts are in fact executed with each M/WBE subcontractor listed in the Plan for an amount not less than the amount listed in the Plan;
  - ii. each M/WBE fulfills a Commercially Useful Function and carries out the entire scope of work and purchases all materials specified in the scope of work with the M/WBE's own human, monetary and other resources as specified in the applicable Letter of Intent; and
  - iii. payment is made to each M/WBE listed in the approved Utilization Plan in the manner required by the contract, and state law, and these Rules as applicable.

**7. Preaward Conference.**

- a. The contracting agency will conduct a preaward conference following the bid opening. A representative from SLDC or SLDCs designated minority and womens contractors assistance agency shall attend this meeting. The contracting agency shall notify attendees of the method of communication and date and time frame of the preaward conference
- b. The contracting agency will review the bidder's proposed MBE and WBE participation and provide the bidder with the results of the utilization plan review and the Authority's recommendation.
- c. If the bidder fails to meet the M/WBE goals, it will be allowed to request a waiver within three days of the preaward conference.

**8. Waiver Requests.**

- a. If the M/WBE Utilization Plan does not meet the goals, the bidder shall submit a request for a partial or total waiver of the M/WBE goals to the Contracting Agency on the form attached as Exhibit 9A. The Contracting Agency shall forward the waiver request to the Authority for approval or denial.
- b. The application for waiver of all or part of the M/WBE goals shall include full documentary evidence of the bidder's good faith efforts to meet the goals prior to bid opening and why the request for waiver should be granted. The application, which shall be in writing, must include a narrative, affidavits or exhibits which verify the actions taken by the bidder to meet the M/WBE goals.

- c. The waiver request must be supported by evidence establishing that the bidder has exhausted all available resources in locating and soliciting bids or proposals from minority and women's businesses and has found it impossible to meet the established goals.
  - d. The Authority will grant a waiver from meeting the 25% MBE and 5% WBE goals, or some portion of them, when documentation submitted by the bidder substantiates that all available resources have been exhausted in locating and soliciting bids or proposals from minority and women contractors, suppliers, and service providers. The Authority will consider the bidder's good faith efforts as provided below. If a waiver is granted, the Authority shall monitor good faith efforts through the duration of the contract.
  - e. If the Utilization Plan does not meet the Goals and the Contractor has not demonstrated appropriate and sufficient Good Faith Efforts, fails to submit a waiver or the waiver submitted merits denial, the Authority may deny the waiver and recommend denial of the contract award.
  - f. Denial of a waiver may be appealed by the bidder, within 10 days of notice of the denial, to the Mayor, who shall rule upon the appeal in due course. Failure on the low bidder's part to exhaust all reasonable methods in a good faith effort to solicit bids prior to bid opening from the MBE and WBE firms listed in the City's Directory may place the award of the contract to the low bidder in jeopardy.
- 6. Post-Submission Requirements.** Within 30 days of contract execution, the contractor must provide the contracting agency and the Authority with fully executed copies of contracts with all M/WBE subcontractors.

**F. Public Works Contracts- Good Faith Effort Review if Goals Not Met.**

If the Utilization Plan does not demonstrate achievement of the M/WBE Goals, the Authority shall review the efforts made by the Contractor to achieve the Goals to determine if the Contractor did in fact make a good faith effort prior to bid opening and forward its recommendation to the Contracting Agency. The Authority shall use the following guidelines in conducting such review.

- 1. The Contractor shall have taken all necessary and reasonable steps, with such steps having the necessary scope, intensity, and appropriateness, to achieve the M/WBE Goals. Such steps must include personal, frequent and persistent contact with individual M/WBEs and personal contact with the Authority to identify prospective M/WBEs for the work. The distribution of solicitations by mail and/or the placement of plans and bid solicitations in plan rooms or other sources of work frequented by M/WBEs shall not alone be sufficient to demonstrate good faith efforts without such personal, frequent and persistent outreach.

2. The following is a non-mandatory, non-exhaustive, non-exclusive list of types of actions that, together with the personal, frequent and persistent contact described above, the Authority may consider as evidence of good faith efforts to obtain M/WBE participation. Other factors or types of efforts may be relevant depending on the nature of the contract and the types of work involved.
  - a. Soliciting through all reasonable and available means (e.g. attendance at pre-bid meetings, advertising and/or written notices) the interest of all certified M/WBEs who have the capability to perform the work required by the Contract. Such solicitations must take place at least two weeks prior to the bid opening date to allow M/WBEs sufficient time to prepare bids/proposals and respond to the solicitation, and the Contractor must take appropriate steps to follow such mass solicitations with personal frequent and persistent contact. The prime contractor should promptly return all calls, faxes and e-mail that it receives from interested M/WBEs. The follow-up should take the form of a telephone call, fax or e-mail during normal business hours.
  - b. Breaking subcontracts down into discrete items or packages that at least some of the M/WBEs in the relevant area may find economically feasible to perform. The prime contract bidder should not deny a subcontract to an otherwise qualified and competitive M/WBE solely because the latter cannot perform an entire package of related items, but the bidder may deny a request to repackage the work where doing so would jeopardize scheduling, or increase that bidder's cost of performing the original package by more than 5%.
  - c. Providing M/WBEs with technical assistance and adequate information about the plans, specifications, and requirements of the contract in a timely manner to assist them in responding to a solicitation. Upon request, the plan holder should permit any interested M/WBE to review the project's plans and specifications at the plan holder's place of business during normal business hours. In addition, the prime contract bidder should have at least one employee available to help the M/WBE identify the specific item(s) in which the latter may have an interest.
  - d. Negotiating fairly with interested M/WBEs, even when selecting an M/WBE contractor or subcontractor may increase the cost of the work; however, where two or more quotes cover the same item(s) of work, the prime contractor bidder should have the discretion to accept the low quote.
  - e. Fairly and thoroughly evaluating the capabilities of particular M/WBEs before accepting or rejecting their bids or proposals. An M/WBE's standing within its industry, membership in specific groups, organizations, and associations and political or social affiliations are not legitimate causes for the rejection or non-solicitation of bids in the Contractor's efforts to meet the

Goals. However, a Contractor may limit its solicitations to union contractors when required by the bid or contract documents and the entirety of the work will be performed by union contractors.

- i. No more than five business days after the bid date, the prime contract bidder should send a letter of Intent to the M/WBEs that the bidder intends to use on the project.
  - ii. No more than one week after it determines that it has been successful, the prime contract bidder should also communicate with any M/WBE that unsuccessfully bid for a portion of the work. The prime contract bidder should provide a legitimate and non-discriminatory reason for not using the M/WBE.
- f. Not denying a subcontract to an otherwise qualified and competitive, and if necessary, certified M/WBE solely because the latter cannot provide a performance or payment bond for the work, unless the bidder's bonding is contingent upon bonding for all subcontractors.
  - i. Making efforts to assist interested M/WBEs in obtaining bonding, lines of credit, or insurance as required by the bid or contract documents.
- g. Effectively using the services of the Authority to provide assistance in the recruitment and placement of M/WBEs.
- h. Providing notice of intent to the construction clearinghouse as soon as feasible, but no fewer than seven calendar days before the date on which the firm desires to have all quotes in hand. The notice should be in writing and should:
  - i. include the name, address, fax number, telephone number and e-mail address of a contact person;
  - ii. specify the items of work that the plan holder may subcontract; and
  - iii. expressly encourage M/WBEs to quote the items contained in the notice of intent.
- i. Maintaining a written policy stating that it affirmatively supports subcontracting to M/WBEs and that bringing such firms into the mainstream of the construction industry is a priority for that firm (independent and apart from its interest in any one project).
- j. Assigning a senior official the responsibility of serving as a liaison between the firm and the M/WBES in the relevant area (independent and apart from its interest in any one project).

- k. The Authority may consider the percentages of minority and women participation submitted by other bidders in conjunction with their bids in determining whether a Contractor has made good faith efforts. For example, when the apparent low bidder fails to meet the Goals but others bidders have met the Goals, the Authority may consider whether, with additional reasonable efforts, the apparent low bidder could have met the goal. Conversely, if the apparent low bidder fails to meet the Goals but equals or exceeds the participation levels specified in the second-lowest bid or the average M/WBE participation levels specified in the other bids, the Authority may view this, in conjunction with other factors, as evidence of the apparent low bidder's good faith efforts.
- l. If no certified M/WBEs are available, the following shall count towards good faith efforts (but not toward goals) on a case-by-case basis if approved by the Contractor and Authority:
  - i. use of certified DBEs employing minorities and/or women; or
  - ii. other efforts and solutions agreed upon by the Contractor and Authority.
- 3. It is the Contractor's responsibility to make a portion of the work available to M/WBE subcontractors and suppliers and to select those portions of the work or material needs for M/WBE participation consistent with the availability of M/WBE subcontractors and suppliers so as to facilitate M/WBE participation. Contractors are responsible for maintaining evidence of good faith efforts. A Contractor using good business judgment would consider a number of factors in negotiating with any and all subcontractors and would take a firm's price and capabilities as well as contract goals into consideration. This same consideration is expected in the Contractor's dealings with M/WBEs.
- 4. Further, the ability or desire of a contractor or general contractor, consultant, supplier, or other entity working with the Contractor to perform the work of a contract with its own forces rather than via a subcontract does not relieve the bidder of the responsibility to make good faith efforts to fully achieve the Goals.
- 5. **Authority Approval Required for Changes.**
  - a. Whenever additional contract supplements, extra work orders, or change orders are made that individually, or in the aggregate, increase the total dollar value of the original contract, the contractor shall make every effort to maintain the level of MBE and WBE participation as established in the original contract.
  - b. No Contractor shall change any subcontractor list unless a Substitution Form is submitted in writing to and approved in writing by the Authority. The

Authority shall approve an amendment to the Utilization Plan within two (2) weeks from submission of the request for an amendment in the following circumstances:

- i. The certified MBE or WBE is no longer available or willing to perform the work; and
- ii. Such lack of availability is documented; and
  - A) The Contractor is proposing to replace the M/WBE included in the original Utilization Plan with another M/WBE whose subcontract will be in an amount equal to or greater than the originally included M/WBE and such replacement is otherwise equal (e.g., the Contractor proposes to replace an MBE with an MBE and a WBE with a WBE with the same Certifications); or
  - B) The Contractor demonstrates to the satisfaction of the Authority that such replacement is not possible because (a) there is no comparable MBE or WBE available to perform the work, or (b) the performance of the overall contract Work has progressed to the stage where the insertion of a new MBE or WBE subcontractor would unacceptably delay completion of the Work.

**G. Public Works Contracts- Counting M/WBE Participation.**

- 1. Certification Required.** Only the participation of MBEs and WBEs certified by the Authority prior to the bid opening shall be credited towards the Goals. An entity must be certified as an MBE and/or WBE in a specific area of expertise before the firm's work in a particular area of expertise may be credited towards the Goals.
- 2. Performance of a Commercially Useful Function Required Through the Contract Duration.** A certified M/WBE must perform a Commercially Useful Function, as determined by the Authority in accordance with the provisions below, in order for such firm's work to be credited towards the Goals. To determine whether an MBE or WBE is performing a commercially useful function, the Authority will evaluate the amount of work subcontracted, industry practices, and other relevant factors listed below. For instance, payment to the M/WBE under the contract must be commensurate with the work the M/WBE is actually performing and the M/WBE credit claimed for the performance of the work. The participation of M/WBEs that do not perform a Commercially Useful Function shall not be counted.
- 3. Counting Participation:** Participation shall be counted in accordance with Executive Order 28, Section 4.4. Participation shall only be counted if the M/WBE Subcontractor is afforded and exercises all industry standard rights and

privileges to actively oversee the work of its own M/WBE and non-M/WBE subcontractors, including but not limited to accepting bids, scheduling and directing work, and making payment to subcontractors, vendors and suppliers.

## **H. Joint Ventures.**

Joint ventures between M/WBEs and non-M/WBEs may count towards M/WBE participation if the joint venture requests approval from the Authority, is approved by the Authority and one or more of the joint venture participants are certified as an M/WBE.

### **1. Eligibility.**

- a. The M/WBE joint venture participant must be certified in the area of expertise to be undertaken by the joint venture.
- b. A holding company cannot be an M/WBE participant in a joint venture.
- c. The M/WBE must not be an affiliate of the non-M/WBE firm as described in Part II.E.15.

### **2. Joint Venture Review.** Joint venture agreements must clearly address capital contribution, control, management, risks, profits, ownership, and work to be performed by the M/WBE.

- a. M/WBE capital contribution, control management, risks, and profits must be commensurate with its ownership interest.
- b. Each party in a joint venture should bring real and substantial value to the joint venture enterprise, including both tangible and intangible assets, capital commensurate with their ownership interest, knowledge and skills relative to the portion of the joint venture's business for which they are responsible, and efforts to the success of the venture.
- c. The profit or loss of the joint venture should be distributed between the participants in proportion to the interest in the joint venture.
- d. The joint venture must have a business structure set forth in a signed written agreement that clearly and specifically defines the participation of each party in the contribution of property, capital, efforts, skills and knowledge.
- e. Once approved, there are no annual updates required for joint venture agreements. However, proposed material changes in the joint venture agreement, including management responsibilities among the participants, ownership, or control, should be submitted to the Program.

### **3. Counting Joint Ventures.**

- a. A portion of the total dollar value of a contract with a joint venture equal to the percentage of MBE or WBE participation in the joint venture may be counted as MBE or WBE participation. The MBE or WBE participant in the joint venture must be responsible for a clearly defined portion of the work to be performed, equal to a share in the ownership, control, management, responsibility, risks and profits of the joint venture.
- b. The joint venture must operate in accordance with the submitted joint venture agreement. If it is determined that the M/WBE has not performed its role in accordance with the joint venture agreement and has in fact participated less than expected, participation may be counted at an amount less than originally approved.

### **I. Performance of a Commercially Useful Function.**

**1. Commercially Useful Function Required.** The Authority shall, using the following criteria, review both the proposed Utilization Plan and the actual performance of the work to determine if particular M/WBEs are performing commercially useful functions. The participation of M/WBEs that do not perform a commercially useful function shall not be counted.

- a. An M/WBE performs a commercially useful function when it is responsible for execution of the work of the contract and is carrying out its responsibilities by actually performing, managing, and supervising the work involved. To perform a commercially useful function, the M/WBE must also be responsible, with respect to materials and supplies used on the contract, for negotiating price, determining quality and quantity, ordering and, where applicable, installing the materials/supplies, and paying for the materials/supplies from the M/WBE's own funds. To determine whether an M/WBE is performing a commercially useful function, the Authority shall evaluate the amount of work subcontracted, industry practices, and other relevant factors such as whether the amount the M/WBE is to be paid under the contract is commensurate with the work the M/WBE is actually performing, the M/WBE credit claimed for the performance of the work, and other relevant factors.
- b. An M/WBE does not perform a commercially useful function if its role is limited to that of an extra participant in a transaction, contract, or project through which funds are passed in order to obtain the appearance of M/WBE participation. In determining whether an M/WBE is such an extra participant, the Program Office will examine similar transactions, particularly those in which M/WBEs do not participate.



- c. If an M/WBE does not perform or exercise responsibility for at least 30 percent of the total cost of its contract with its own forces or the M/WBE subcontracts a greater portion of the work of a contract than would be expected on the basis of normal industry practice for the type of work involved, it shall be presumed that the M/WBE is not performing a commercially useful function. When an M/WBE is not presumed to be performing a commercially useful function as provided in this section, the M/WBE may present evidence to rebut this presumption. The Authority may determine, based on such evidence presented, that the firm is in fact performing a commercially useful function given the type of work involved and normal industry practices.

## **2. Determinations of Non-Commercially Useful Function—Appeals Process.**

- a. If it appears that an M/WBE has failed to provide a commercially useful function, the Authority shall provide the M/WBE and the Contractor with written notice detailing the reason for the proposed finding, including citations to the applicable rule and supporting evidence.
- b. The M/WBE may provide any rebuttal to the Authority within fifteen (15) business days of receipt of notice. The rebuttal must be in writing and must contain a statement explaining the M/WBE's position and the reasons the Authority should make a finding that the M/WBE does perform a commercially useful function. The M/WBE may also submit evidence demonstrating the firm's performance of a commercially useful function.
- c. The Authority shall provide the M/WBE and the Contractor with written findings and conclusions regarding the M/WBE's performance of a commercially useful function within fifteen (15) days of receipt of the rebuttal.
- d. Unless and until the M/WBE successfully appeals the Authority's finding, the M/WBE's participation shall not be counted towards the Goals.

## **J. Reporting Requirements.**

### **1. During performance of the contract- Public Works Contracts.**

- a. At a minimum, the Authority shall require Contractors to submit a monthly utilization report and a monthly report of payments. (Exhibits 10 and 11). The report of payments shall, at a minimum, include a listing of MBEs/WBEs participating in the contract, the amount of the contract, how much of the contract has been paid to date, and copies of invoices. The monthly utilization report shall, at a minimum, include a listing of the MBEs/WBEs participating in the contract, earnings for the reporting period, earnings to date, the

percentage of contract completion, and employee information such as names, addresses, residency, race and gender.

- b. The Authority shall review all reports submitted by the Contractor for conformance with the approved Utilization Plan within fifteen (15) days of receipt and shall notify the Contractor in writing within such fifteen (15) day period whether or not the report is acceptable. If the Authority determines that the report is not acceptable, the Authority shall state the reasons for such determination in its written notification to the Contractor.

**2. Contract completion- Public Works Contracts.**

- a. At contract completion, the Contractor shall notify the Contracting Agency and the Authority of completion of the Work and provide the Contracting Agency and the Authority with final documentation of MBE and WBE participation and a final record of payment. (Exhibits 12 and 12A).
  - b. Within thirty (30) days following the Contractor's notification to the Authority of completion of the Work, the Authority shall provide the Contractor with a close-out report stating the final amount of approved MBE and WBE participation in the Contract. The Authority shall provide the Contracting Agency with copies of all reports submitted by the Contractor and issued by the Authority and all Authority correspondence with respect to the reports.
  - c. The contracting agency must have complete and acceptable documentation as determined by the Authority of amounts paid to all project MBE and WBE subcontractors on file before the final payment is made to the prime contractor.
- 3. Requests for Information.** The Contractor and all subcontractors shall promptly respond to all Authority requests for information pertaining to reports and compliance with these Rules within the timelines set forth in the request. Requests for additional time must be submitted to the Program Office in writing. If the Contractor or any subcontractor believes that the request for information is unduly intrusive, such Contractor or Subcontractor shall state the reasons for such belief in writing and provide such statement to the Director. The Director shall review the request and the Contractor/Subcontractor statement and shall determine whether or not to withdraw the request.
- 4. Affirmative Duty to Report.** The Contractor and all Subcontractors shall promptly report to the Authority any change that impacts compliance with the Utilization Plan or an M/WBE's performance of a Commercially Useful Function, and/or M/WBE certification eligibility within 30 days of such change.

**K. Compliance Review During Contract Performance.**

All Contractors and Subcontractors shall afford the Authority access to all books and records pertaining to the City Contracting Opportunity at the Authority's request, except, however, Contractors and Subcontractors need not provide the Authority with access to proprietary information or trade secrets. All site visits conducted for the purpose of evaluating books and records at the principal place of business should be scheduled. All site visits conducted for the purpose of observing operations and/or evaluating worksite documents may be unscheduled.

## **1. Site Visits—Non-Construction Projects.**

- a. **M/WBE Principal Place of Business.** The Contracting Agency and/or the Authority may conduct one or more site visits to an M/WBE's principal place of business, temporary, or satellite offices to evaluate records and operations to ensure compliance with these rules. The M/WBE shall maintain copies of all subcontracts related to the Project at the M/WBE's principal place of business.
- b. **General Contractor's Principal Place of Business.** The Contracting Agency and/or the Authority may conduct one or more site visits to the general Construction Contractor's principal place of business, temporary, or satellite offices to evaluate records and operations to ensure compliance with these rules. The general contractor shall maintain copies of all subcontracts related to the Project at the general contractor's principal place of business.

## **2. Site Visits—Construction Projects.**

- a. **Project site.** The Contracting Agency and/or the Authority shall conduct site visits to the project site to observe operations and evaluate on-site documents, ensure that M/WBE contractors are working within their areas of expertise, and are performing the work described in the contract and as stated in the approved Utilization Plan. The Authority will ensure the M/WBE has the workforce on its payroll required to complete the work described in the Utilization Plan. The compliance officer may attend any project meetings ongoing at the time of the visit. The compliance officer may examine and observe all records and documents on-site, including financial documents, equipment, work, project site, and interactions between the contractor and M/WBE at time of visit to evaluate compliance with these Rules. The Contractor shall maintain copies of all subcontracts and sub-subcontracts on the jobsite.
- b. **M/WBE Principal Place of Business.** The Contracting Agency and/or the Authority may conduct one or more site visits to an M/WBE's principal place of business, temporary, or satellite offices to evaluate records and operations to ensure compliance with these rules.

- c. **Prime/General Contractor's Principal Place of Business.** The Contracting Agency and/or the Authority may conduct one or more site visits to the Prime/General Contractor's principal place of business, temporary, or satellite offices to evaluate records and operations to ensure compliance with these rules.

### **3. Communications with Subcontractors.**

The Authority may communicate directly with M/WBE and other Subcontractors to verify information contained in any or all reports and/or records, M/WBE performance of commercially useful functions, and M/WBE control of the work and the business entity during the performance of the Contract. Such communications may include the review of documentation to payments to M/WBEs and review of payments from M/WBEs.

### **L. Contractor/Subcontractor Maintenance of Records; Review After Contract Completion; Patterns of Willful Non-Compliance or Misrepresentation.**

All Contractors and subcontractors that perform Work pursuant to a City Contracting Opportunity shall retain all records related to the City Contracting Opportunity for a period of three (3) years following the Authority's issuance of a close-out report. During such three (3) year period, if the Authority believes that any Contractor or Subcontractor has failed to comply with these Rules in any subsequent City Contracting Opportunity, the Authority may review records relating to previous City Contracting Opportunities for the purpose of determining whether a pattern of willful noncompliance exists. If a pattern of willful non-compliance and/or misrepresentation is determined to exist and is documented, the Authority may seek to impose penalties on any Contractors and Subcontractors involved in such willful noncompliance and/or misrepresentation as provided in these Rules.

### **M. Payments to M/WBE and Other Contractors and Subcontractors.**

All contractors and subcontractors must issue payment to lower tier subcontractors in accordance with the Missouri Prompt Payment Act.

### **N. Penalties.**

General contractors, consultants, prime contractors, suppliers, subcontractors and developers (each individually an "entity") who fail to comply with the Compliance Requirements set forth in this Part or knowingly and willfully provide false, erroneous, misleading or incorrect information or statements in connection with any material aspect of the Program or these Rules (collectively, "Misrepresentations"), such matter shall be immediately investigated by the Authority. Sanctions and penalties may include one or more of the following:

1. Penalties negotiated by the parties in a contract;

2. Under Executive Order 28:
  - a. Withholding of contract award;
  - b. Suspension of contract;
  - c. Withholding of payments;
  - d. Rescission of contract for material breach pertaining to M/WBE participation;
  - e. Refusal to accept a proposal;
  - f. Disqualification from eligibility to submit a bid or proposal and for providing goods or services to the City for a period not to exceed 1 year.

## **PART IV. PROGRAM REVIEW COMMITTEE PROCEEDINGS**

### **A. Program Review Committee Purpose.**

The purpose of the Program Review Committee (“PRC”) shall be to review and make rulings on Authority recommendations when such decisions involve the following:

1. Approval or denial of an Application for Certification as an MBE and/or WBE, whether pursuant to a Standard Application or an Abbreviated Application;
2. Denial of a Renewal Application;
3. Removal of an MBE and/or WBE’s certification; and
4. Recommendations to impose penalties as provided in a contract.

### **B. Authority Action and Recommendation to PRC.**

1. The Authority shall submit any recommendation involving the topics listed in Part IV.A to the PRC. The Authority shall provide a copy of such recommendation to the subject M/WBE or applicable entity at the time of submission to the PRC. Such recommendation shall be in writing and shall include the following:
  - a. **Narrative.** A narrative explanation of the reasons for the recommendation, which explanation shall include specific reference to the applicable provision(s) of these Rules that the Authority contends have been violated or with which the Authority contends the M/WBE or other entity has failed to comply;
  - b. **Supporting Documentation.** All supporting documents submitted by the M/WBE or applicable entity and/or the Authority in conjunction the recommendation; and
  - c. **Proposed Action.** An explanation of the proposed action to be taken by the PRC and applicable details.
2. The PRC shall review and take action on any such recommendation as provided with respect to the Authority’s recommendations pursuant to this Part.
3. The subject M/WBE or other entity shall remain an eligible M/WBE and/or be otherwise eligible for participation in City Contracting Opportunities during the pendency of proceedings to remove its eligibility, and, in the case of an M/WBE, the firm’s participation shall continue to be counted until the PRC has made a final determination on the matter before it.

### **C. Program Review Committee Composition.**

1. The PRC shall consist of the following five members with voting rights to be appointed by SLDC for a period of time established by SLDC:
  - a. One member with demonstrated experience in the field of finance and accounting;
  - b. One member with demonstrated experience in the field of engineering and construction;
  - c. One member with demonstrated experience with M/WBE matters;
  - d. One member dedicated to the advancement of minorities and/or women; and
  - e. One member with demonstrated experience with business associations and knowledge of business structures.
2. The Committee shall elect a chairman from among its members.
3. The Committee shall elect a secretary from among its members. The Secretary shall record in the minutes the time and place of each meeting of the PRC, names of PRC members present, all official acts of the PRC, the votes of each member except when the acts are unanimous and, when requested, a member's dissent, with his or her reasons, and the actions of the PRC thereon, shall be recorded in the minutes. All communications and requests referred to the PRC for official action shall be appended to and made a part of the minutes. The Secretary shall cause the minutes to be transcribed and presented for approval or amendment at the next regular meeting. The official copy of the minutes and any amendments thereto, or a true copy thereof, certified by the Secretary of the PRC shall be kept at the offices of the Authority and shall, subject to reasonable regulations, be open to the public inspection.

**D. Program Review Committee Procedures.** The PRC shall act on Authority recommendations in the following manner:

1. **Meeting Scheduling & Notices.** Upon receipt of the Authority's recommendation, the PRC shall promptly schedule a meeting to review and make a determination on such recommendation and shall provide written notice of such meeting to subject applicant, M/WBE or other entity. Such notice shall include a full copy of the Authority's recommendation, including all supporting documentation. Such meeting shall not be held sooner than fifteen (15) days from the date notice of the time, date and place of the meeting is provided to the subject applicant, M/WBE or other entity. The Authority shall provide the PRC with administrative and scheduling support, as necessary. Such notice shall also include notification to the subject applicant, M/WBE or other entity of such applicant, M/WBE or other entity's rights, as follows:

- a. The right to provide a response and evidence to rebut the Authority's recommendation directly to the PRC;
  - b. The right to request a postponement of the meeting for the purpose of preparing a response to the PRC for a period of up to ten days;
  - c. The right to attend and observe all PRC meetings and deliberations;
  - d. The right to make a brief oral presentation at the meeting;
  - e. The right to have others with information pertaining to the recommendation make brief oral presentations at the meeting; and
  - f. The right to be represented by legal counsel at the meeting.
2. **Ex Parte Communication with the PRC Prohibited.** Neither the Authority nor the firm may communicate with the PRC or any member of the PRC regarding the merits of the matter without the knowledge of the other party for the duration of the proceedings, except in the course of PRC meetings.
3. **Conduct of PRC Meetings.**
- a. The PRC shall hold all meetings on the dates and at the times and places specified in any written notices. If the PRC postpones any meeting, the PRC shall issue a written notice of postponement and the date, time and place when and where such postponed meetings shall occur to all parties who received written notice of the originally scheduled meeting. The PRC shall post notices of meetings as required by the Missouri Open Meetings Law.
  - b. The Authority must prove that the proposed action is for just cause. The Authority shall submit all relevant documentary evidence involving the proposed recommendation. The PRC shall not engage in independent investigation. Except as otherwise provided in these Rules, the PRC shall base its decisions on the status and circumstances of the firm as of the date of the PRC meeting on the matter. In the case of removal of eligibility, the PRC shall disqualify any evidence or opinion based on the Authority's reinterpretation or changed opinion of information available to the Authority at the time the firm was certified.
  - c. The PRC Chair shall open the meeting and conduct a roll call. A majority of PRC members in attendance at the meeting place are required for a quorum. A quorum shall be necessary in order for the PRC to conduct business. If a quorum is not present, the Chair shall adjourn the meeting to a subsequent date and time.



- d. The PRC shall not be bound by any rules of order, evidence or procedure in its meetings, hearings, or investigations, except such as it may itself establish or as are expressly established in these Rules.
- e. If a quorum is present, the PRC shall hear testimony in the following order. At any point during the meeting any PRC member may question any person presenting testimony.
  - i. The Authority shall present its recommendations, the reasons for its recommendations, and supporting evidence within time limits prescribed by the PRC.
  - ii. The subject M/WBE or other entity may present a rebuttal and supporting evidence within time limits prescribed by the PRC. Such time limits may not be less than the amount of time allowed to the Authority.
  - iii. If the subject M/WBE or other entity presents a rebuttal, the Authority may respond to the rebuttal within time limits prescribed by the PRC.
  - iv. If the Authority responds to the rebuttal, the subject M/WBE or other entity may respond within time limits prescribed by the PRC. Such time limits may not be less than the amount of time allowed to the Authority.
- f. Following the presentation of testimony, the PRC shall deliberate, considering all the facts and evidence, viewed as a whole. Once such deliberations are complete, the PRC shall take a roll call vote on the following form of question: “Shall the PRC uphold the recommendation of the Authority in the matter of (firm)?”
  - i. If a majority of the members of the PRC present and voting vote in the affirmative, the recommendation of the Authority shall become the final determination of the PRC.
  - ii. If a majority of the members of the PRC present and voting vote in the negative, the recommendation of the Authority shall be deemed to be reversed and the Authority shall take action consistent with the PRC’s decision.
  - iii. If it appears that the evidence is incomplete or unclear with respect to matters likely to have a significant impact on the outcome of the case or if circumstances have changed such that the Program’s proposed action may no longer be applicable in light of the change of circumstances, the PRC may require the Authority to take further action before making a finding, such as provide clarification or augmentation of the facts, and/or consider new evidence. If a majority of the members of the PRC present and voting vote to require the Authority to take further action, the PRC shall

articulate the reasons therefore and the Authority shall take further action in accordance with the PRC's decision.

- iv. If a majority of the members of the PRC present and voting vote to modify the Authority's recommendation, the Authority shall take action consistent with the PRC's decision.
- g. The PRC Chair shall ensure that written notice of the PRC's determination is provided to all parties (including the complainant, if any) within five (5) days of the taking of the roll call vote.

#### **E. Certification Decisions**

1. Standard Application for Certification. The PRC shall consider recommendations for approval or denial of Standard Applications for Certification and denials of renewal applications for certification. The PRC shall consider M/WBE eligibility according to the Standard Certification rules set forth under Part II, except Part II.B shall not apply.
2. For firms seeking certification through the Abbreviated Application process, the Program Review Committee shall only consider the following grounds of eligibility:
  - a. As to the persons identified by the DBE certification process as being in control and having ownership of the Applicant, whether such persons are Minority Group Members or Women, as applicable. If the firm's DBE Certification was predicated on Minority Group membership and/or status as a Woman according to DBE rules as opposed to or including social and economic disadvantage, the PRC shall take such the certifying agency's determination as to such predicates into account;
  - b. Whether the firm is currently certified by the initial certifying agency; however, an application shall not be denied solely on the grounds that DBE certification was denied due to business size or personal net worth; and
  - c. Whether the firm is a local firm.
3. If the PRC upholds the recommendation for denial of Certification, the Applicant shall not be permitted to reapply for Certification until six (6) months from the date the Applicant originally submitted an application have elapsed unless:
  - a. the Applicant appeals such denial as provided below or,
  - b. for a Standard Application or renewals of certification initially obtained via a Standard Application, the Applicant cures the deficiency as described in Part II.C.7.

## **F. Willful Noncompliance in General—Penalties and Sanctions**

1. If, at any time following a preliminary investigation, the Authority or Contracting Agency has reason to believe that any firm or representative of a firm, including an M/WBE firm, general contractor, consultant, supplier, subcontractor and/or developer, has knowingly and willfully provided false, erroneous, misleading or incorrect information or statements in connection with any material aspect of the Program or these Rules (collectively, “Misrepresentations”), such matter shall be immediately investigated by the Authority.
2. The Authority may refer the matter a) in accordance with Executive Order 28, b) to the PRC for determination of a penalty according to the terms negotiated by the parties in the contract, and/or c) for possible criminal prosecution.

## **G. Removal of Eligibility**

1. **Process and Grounds for Removal of Eligibility of M/WBE Certification.**  
The Authority may recommend that the PRC remove an M/WBE’s eligibility. The Authority must provide the M/WBE with the reasons for the recommendation and the evidence that will be used to support the Authority’s recommendation.
2. The PRC may remove eligibility of an M/WBE’s certification if any of the following circumstances are documented:
  - a. If the M/WBE obtained certification via the Standard Application process, the M/WBE fails to:
    - i. submit a timely annual affidavit of no change with supporting documentation, after receiving the requisite written reminders from the Authority following the date on which such affidavit or application was due;
    - ii. After the M/WBE’s submission of a renewal application or notice of material changes in its ownership and/or control, the Authority finds that such M/WBE is no longer eligible for certification.
  - b. If the M/WBE obtained certification via the Abbreviated Application process and:
    - i. fails to comply with material DBE rules, including those pertaining to submission of notice of material changes, renewal applications, and No Change Affidavits;
    - ii. fails to provide the Authority with copies of the annual No-Change Affidavit submitted to the MRCC member agency managing the firm’s

DBE certification and/or the annual contact update after at least two demands are made to the firm in writing by the Authority;

- iii. fails to provide notice to the Authority that the M/WBE's certification as a DBE has not been renewed or has been removed; or
- iv. fails to remain in good standing with the MRCC-member agency managing the firm's DBE certification, other than failure to meet such financial limitations will result in removal of M/WBE certification.
- c. The M/WBE otherwise fails meet the requirements for continued certification eligibility under these Rules;
- d. The M/WBE is no longer a Local Firm;
- e. The M/WBE fails to timely notify the Authority of material changes in its ownership and/or control;
- f. The Authority finds, for a third time in an twelve (12) month time period, that the M/WBE has received payment or has allowed its participation to be credited towards the Goals in connection with but has failed to perform a Commercially Useful Function in a City Contracting Opportunity; or
- g. The Authority finds that an M/WBE has knowingly and materially and/or fraudulently misrepresented any aspect of its original application, its renewal application or material aspects of its participation in or performance on a City Contracting Opportunity.

### **3. Effects of Removal of Eligibility.**

- a. When a general contractor, consultant, prime contractor, supplier, and/or developer has made a commitment to using, or the City has made a commitment to using an M/WBE general contractor, prime contractor, consultant, general contractor, supplier, and/or developer whose Certification has been removed pursuant to this section, but a contract or subcontract has not been executed before the Program Review Committee issues the notice of the removal of eligibility decision provided for herein, the participation of the firm whose certification has been removed shall not be credited toward the Goals. The Authority may direct the City Contracting Agency, general contractor, consultant, general contractor, supplier, and/or developer to meet the contract goal with an eligible M/WBE firm or demonstrate that it has made a good faith effort to do so.
- b. If a City Contracting Agency or a general contractor, consultant, prime contractor, supplier, or developer has executed a contract or subcontract with a firm whose Certification has been removed before the Authority has

notified the firm of its ineligibility and before the Authority has updated the removal of eligibility in the M/WBE directory, the City, the general contractor, consultant, general contractor, supplier, or developer may continue to use the firm on the contract and may continue to receive credit toward the M/WBE Goals for the firm's work.

- c. If the PRC removes an M/WBE's eligibility, the firm shall not be permitted to reapply for Certification until six (6) months from the date the firm's M/WBE eligibility has been removed have elapsed.

## **PART V: APPEALS**

### **A. Administrative Review Officer Qualifications.**

The Director of the Airport Authority may appoint at least two Administrative Review Officers to serve on a rotating basis to be determined by the Director of the Airport Authority. Such Administrative Review Officers shall be managers or professional employees of the City of St. Louis or an agency or affiliate thereof, provided, however, that in no event shall an Administrative Review Officer be involved in the day-to-day operations of the Program or a member of the PRC.

### **B. Grounds for Appeal.**

1. Except as otherwise provided herein, any party aggrieved by any decision of the Authority with respect to Compliance, the Authority's failure to recommend removal of eligibility when a complainant believes that the Authority should have recommended removal of eligibility, or any decision of the PRC with respect to granting, withholding, or removing eligibility to participate in City Contracting Opportunities may appeal such decision by filing an appeal with an Administrative Review Officer designated by the Authority, in accordance with the procedures set forth herein. The Authority shall provide the name of the Administrative Review Officer to whom an appeal shall be referred, together with the address, telephone number, and e-mail address for such person, to any party requesting such information.
2. For firms denied certification through the Abbreviated Application process, appeals shall be limited to the following grounds and the Administrative Review Officer shall consider only the following factors:
  - a. Whether the firm is certified by the initial certifying agency;
  - b. Whether the firm is a Local Firm; and
  - c. Whether the owners and/or controlling members of the firm are Minority Group Members and/or Women, as applicable.
3. If a firm certified through the Abbreviated Application process has had its underlying certification removed by the initial certifying entity, appeals shall be limited to whether the initial certifying agency has, in fact, removed the firm's eligibility as a DBE and whether or not such removal of eligibility was based solely on the basis of the firm's failure to comply with the financial limitations imposed by federal DBE program regulations.

### **C. Form and Timing of Appeal.**

1. The aggrieved entity must file its appeal in writing with the Administrative Review Officer within thirty (30) calendar days following receipt of notice of the PRC's adverse decision. Such filing shall include:
  - a. A written statement of the aggrieved party's reasons for believing that the decision was in error and should be reversed, together with documentation supporting the appellant's position; and
  - b. A copy the decision of the Authority or Program Review Committee being appealed, together with all supporting documents submitted by the Authority to the Contracting Agency and the PRC, as applicable, in conjunction with the application or decision.
  - c. If desired by the Appellant and if applicable, the Appellant may also provide evidence that Appellant has cured any circumstance that resulted in a denial of or removal of eligibility.
2. The Administrative Review Officer may accept an appeal later than 30 calendar days after the date of the decision if such Officer determines that there was good cause for the late filing of the appeal. It shall be the aggrieved party's responsibility to submit a written request for such extension along with the appeal to the Administrative Review Officer as soon as practicable along with an explanation and any related supporting documentation regarding the reasons for the delay.

#### **D. Procedures.**

1. **Status During Appeal Process.** Until the Administrative Review Officer makes a decision with respect to the appeal, the decision of the Authority and/or Program Review Committee, as applicable, shall remain in effect.
2. **Ex Parte Communication with the Administrative Review Officer Prohibited.** No employee of the Authority, no member of the PRC and no person associated with the appellant in any way shall communicate with the Administrative Review Officer regarding the merits of the matter without the knowledge of the other party for the duration of the appeal process.
3. **Notices Required and Responses Permitted.** Upon receipt of a timely filed appeal, the Administrative Review Officer shall provide to the Authority a complete copy of the appeal submitted by the appellant and to the PRC, if the PRC was involved in the decision under appeal. The Authority and/or the PRC, if applicable, shall have thirty (30) days from receipt of notice to prepare and submit a response to the Administrative Review Officer. Such response shall be based on and include only such information as was in the Authority's and/or PRC's possession at the time of the decision being appealed and shall not include a

reinterpretation or changed opinion of information available at the time of the decision being appealed. Such response may include:

- a. A narrative statement explaining the reasons the decision of the Program Office and/or Program Review Committee should not be reversed; and
  - b. Copies of evidence in the Authority's/PRC's possession at the time of the decision being appealed demonstrating why the decision was appropriate.
4. **Appellant Reply Permitted.** The appellant may reply to the Authority's/PRC's response, provided that such reply is submitted within 15 calendar days following of receipt of the response. Such response shall only address issues set forth in the Authority/PRC response and shall not introduce any new evidence, except that, in submitting a reply, the Appellant may introduce evidence that Appellant has cured any circumstance that resulted in a denial of or removal of eligibility.
  5. **Authority/PRC Rebuttal Permitted.** Upon receipt of the appellant's reply, the Authority/PRC may, within (15) calendar days following the date a copy of the reply was received, submit a rebuttal to any statements contained in the appellant's reply. Such rebuttal shall only address issues set forth in the appellant's reply and shall not introduce any new evidence, except that if the Appellant has introduced evidence that Appellant has cured any circumstance that resulted in a denial of or removal of eligibility, the rebuttal of the Authority/PRC may also address such evidence.
  6. **Extensions of Time.** The Administrative Review Officer may extend any time period set forth in this section upon the written request of a party and a showing of good cause, provided, however, that no extension shall be granted for a time period in excess of forty-five (45) days. The Administrative Review Officer shall notify all parties in writing of a decision to grant any such extension.

#### **E. Administrative Review and Decision.**

1. **Review.** The Administrative Review Officer shall conduct a de novo review of the matter based solely on the evidence submitted by the parties and shall, within fifteen (15) days following the submission of an appeal and all responses permitted by Section D above (or the expiration of all time periods for the filing of such responses), make a decision with respect to the appeal based solely on the evidence.
  - a. The Administrative Review Officer shall base all decisions on the status and circumstances existing as of the date of the Authority's/PRC's decision, except that the Officer shall also consider evidence regarding whether the Appellant has cured any circumstance that resulted in a denial of or removal of eligibility if the Appellant submits such evidence.



- b. The Administrative Review Officer shall disqualify any evidence based on the Authority's reinterpretation or changed opinion of information available to the Authority at the time the decision being appealed was made unless such evidence relates to the new evidence submitted by Appellant during the appeal process that Appellant has cured any circumstance that resulted in a denial of or removal of eligibility.
2. **Remand.** If it appears that the evidence is incomplete or unclear with respect to matters likely to have a significant impact on the outcome of the appeal, the Administrative Review Officer may remand the matter to the Authority or the PRC as applicable, with a request for clarification or augmentation of the evidence and/or decision before making a finding. The Administrative Review Officer may also remand a matter to the Authority or PRC for rehearing and redeliberation consistent with these Rules.
3. **Decisions and Notice.** If the Administrative Review Officer does not remand the matter to the Authority or the PRC, the Officer shall, after reviewing the evidence, issue a decision. The Administrative Review Officer's decision shall definitively state whether or not the actions/decisions of the Authority and/or PRC should be reversed or upheld. The Administrative Review Officer shall provide written notice of its decision to the appellant, to the Authority, and, as applicable, to the PRC promptly after such decision is made. Such notice shall include the decision and the reasons for the decision, including specific references to the regulations and evidence presented that supports each reason for the decision. If the Administrative Review Officer rules in favor of the appellant, the notice shall direct the Authority and/or PRC, as applicable, to take steps to reverse the original decision.

#### **F. Decisions Shall Be Administratively Final.**

All decisions of the Administrative Review Officer shall be administratively final and shall be deemed to be the final decision of the City. The Missouri court system shall be the only remaining appeal venue available to an aggrieved party pursuant to Section 536.150 of the Revised Statutes of Missouri.

#### **G. Authority Action Following Administrative Review Officer's Decision.**

The Authority and/or PRC, as applicable, shall take the action(s) directed by the Administrative Review Officer, if any, as quickly as possible but in no event shall more than five (5) calendar days elapse from the time of such notice before such direction is implemented.

## **MBE/WBE ABBREVIATED CERTIFICATION APPLICATION**

If your firm is currently DBE Certified by the Missouri Regional Certification Committee (MRCC) and you have a local presence in the St. Louis Metropolitan Statistical Area (SLMSA), you may be eligible for an Abbreviated Certification Application submittal process. The MRCC certifying agency, to which you are DBE certified, must submit to the City of St. Louis all documentation on your firm that resulted in a successful determination that the firm is qualified as a DBE.

This application is for MBE and WBE certification with the City of St. Louis. The company submitting the application must be at least fifty-one percent (51%) owned by one or more women and/or minority individuals with United States (U.S.) citizenship or a lawfully admitted permanent resident of the U.S. Your firm must be a for-profit business. Please place a check mark in the space next to the appropriate designations that you wish to apply.

☐ **Minority Business Enterprise (MBE)**

☐ **Women Business Enterprise (WBE)**

**You must complete and submit this application to the City of St. Louis and also provide proof that your firm is a local firm within the St. Louis Metropolitan Statistical Area (SLMSA) in order to meet the requirements for the MBE/WBE program.**

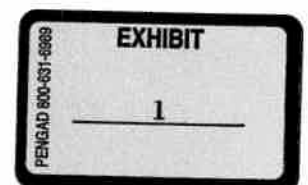
What is your preferred method of correspondence?

**Please check:** ☐ **Mail** ☐ **Fax** ☐ **E-mail**

Send your completed application package to the following address:

**City of St. Louis (MBE/WBE Program)  
Lambert-St. Louis International Airport®  
DBE Program Office  
P. O. Box 10212  
St. Louis, MO 63145**

**Website: www.mwdbbe.org Error! Hyperlink reference not valid.  
Office (314) 426-8111  
Fax (314) 890-1305**



# THE CITY OF ST. LOUIS

## MINORITY/WOMEN BUSINESS ENTERPRISE PROGRAM

### MBE/WBE ABBREVIATED CERTIFICATION APPLICATION

#### ROADMAP FOR APPLICANTS

**1. Should I apply?**

- Is your firm at least 51%-owned by minority group individual(s) or women who also control the firm?
- Does your firm have a local presence in the St. Louis Metropolitan Statistical Area (SLMSA)?
- Is your firm organized as a for-profit business?

⇒ If you answered “Yes” to all of the questions above, you may be eligible to participate in the MBE/WBE program.

**NOTE: You must complete and submit this application to the City of St. Louis and also provide proof that your firm is a local firm in order to meet the requirements for the MBE/WBE program.**

**2. Be sure to attach all of the required documents listed in the Documents Check List at the end of this form with your completed application.**

**3. Where can I find more information?**

- [www.mwdbe.org](http://www.mwdbe.org)

**MBE/WBE ABBREVIATED CERTIFICATION APPLICATION**  
**\*MUST BE CURRENTLY DBE CERTIFIED WITH PRESENCE IN THE ST. LOUIS  
METROPOLITAN STATISTICAL AREA (SLMSA)**

**SECTION I:**

DATE: \_\_\_\_\_

NAME OF FIRM: \_\_\_\_\_

BUSINESS MAILING ADDRESS: \_\_\_\_\_ CITY, STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

LOCAL MAILING ADDRESS: \_\_\_\_\_ CITY, STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_ TITLE \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ WEBSITE ADDRESS: \_\_\_\_\_

SSN/FEDERAL TAX I.D.: \_\_\_\_\_ EST.YR/END ANNUAL SALES AMOUNT: \_\_\_\_\_

YEAR FIRM STARTED: \_\_\_\_\_ DATE OF ACQUISITION: \_\_\_\_\_

**METHOD OF ACQUISITION: (CHECK ONE)**

- ☐ Bought Existing Business    ☐ Started a New Business    ☐ Secured a Franchise    ☐ Merger/Consolidation  
☐ Inherited a Business    ☐ Other (Specify)

\_\_\_\_\_

FULL TIME EMPLOYEES: \_\_\_\_\_ PART TIME EMPLOYEES: \_\_\_\_\_

LIST MRCC PARTNER AGENCY THAT YOU ARE CURRENTLY CERTIFIED WITH AND CERTIFICATION DATE:\*

AGENCY NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*YOU MUST SUBMIT A COPY OF YOUR DBE FILE AND ANY UPDATED INFORMATION.**

## MBE/WBE ABBREVIATED CERTIFICATION APPLICATION

### SECTION II:

#### TYPE OF BUSINESS STRUCTURE: (Check One)

☐ C – Corporation    ☐ P – Partnership    ☐ S – Sole Proprietorship    ☐ L – Limited Liability Company

#### TYPE OF BUSINESS (Check Primary Function)

<input type="checkbox"/> DW – Distributor/Wholesale	<input type="checkbox"/> CC – Construction Contractor	<input type="checkbox"/> MF – Manufacturer
<input type="checkbox"/> CP – Consultant/Professional	<input type="checkbox"/> SC – Service Contractor	<input type="checkbox"/> BA – Broker/Agent
<input type="checkbox"/> FI – Finance & Insurance	<input type="checkbox"/> RRL – Real Estate, Rental & Leasing	<input type="checkbox"/> RT – Retail Trade
<input type="checkbox"/> IF – Information	<input type="checkbox"/> TW – Transportation & Warehousing	<input type="checkbox"/> OS – Other Services
	<input type="checkbox"/> TR – Trucking & Hauling	(Except Public Administration)

**NAICS CODE(S):** \_\_\_\_\_  
If you don't know your NAICS Code, go to: <http://www.naics.com/search.htm>

**NATURE OF BUSINESS:** (Provide full description and relevant information) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MINORITY and/or WOMEN OWNERSHIP:** (Specify the ethnic origin and percentage of ownership of the person(s) who own & control the firm.)

**ARE MAJORITY OWNERS CITIZENS OF THE UNITED STATES?** ☐ YES ☐ NO (Include Proof of Ownership)

<input type="checkbox"/> BLM Black American Male _____ %	<input type="checkbox"/> BLF Black American Female _____ %
<input type="checkbox"/> HIM Hispanic American Male _____ %	<input type="checkbox"/> HIF Hispanic American Female _____ %
<input type="checkbox"/> NAM Native American Male _____ %	<input type="checkbox"/> NAF Native American Female _____ %
<input type="checkbox"/> APM Asian-Pacific American Male _____ %	<input type="checkbox"/> APF Asian-Pacific American Female _____ %
<input type="checkbox"/> SA Subcontinent Asian American Male _____ %	<input type="checkbox"/> SA Subcontinent Asian American Female _____ %
<input type="checkbox"/> Caucasian American Male _____ %	<input type="checkbox"/> Caucasian American Female _____ %

Ethnic group status shall be determined on the basis of the definition in the guidelines. Provide documentation, i.e., birth certificate, and any and all such materials to show ethnic group status as described above.

Name		Title	% Owned	Ethnicity	Gender
Owner #1 (If Applicable)					
Owner #2 (If Applicable)					
Owner #3 (If Applicable)					
Owner #4 (If Applicable)					

## MBE/WBE ABBREVIATED CERTIFICATION APPLICATION

### MBE/WBE AFFIDAVIT OF CERTIFICATION

**Note:** (This form must be completed and notarized. Applications will be returned for failure to complete all fields.)

I have completed the MBE/WBE abbreviated application for certification with the City of St. Louis as a currently DBE certified company with presence in the SLMSA and hereby certify that the information contained herein is true and accurate to the best of my knowledge and belief. I understand that completion of this form (together with any and all attachments thereto) will not be the sole criteria for determining certified eligibility status. I also understand that once accepted, certification with the City of St. Louis can be terminated in accordance with the rules and regulations of the City MBE/WBE certification program.

\_\_\_\_\_  
PRINCIPAL'S SIGNATURE

\_\_\_\_\_  
NAME (Please Print)

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

**\*\*PLEASE REMEMBER:** Any change in ownership, control or management which could affect your certification status must be reported within thirty (30) days of said change. If not reported, this could result in your immediate de-certification.

DATE: \_\_\_\_\_

STATE OF: \_\_\_\_\_

COUNTY OF: \_\_\_\_\_

On this \_\_\_\_\_, Day of \_\_\_\_\_, 201\_\_ before me appeared (Name) \_\_\_\_\_

NOTARY SEAL:

NOTARY PUBLIC \_\_\_\_\_

MY COMMISSION EXPIRES: \_\_\_\_\_



**LAMBERT-ST. LOUIS  
INTERNATIONAL AIRPORT®**

**DBE/ACDBE  
No Change Affidavit**



I insert name of DBE/ACDBE firm owner(s), swear<sup>1</sup> that there have been no changes in insert name of DBE/ACDBE firm circumstances affecting its ability to meet the size, disadvantaged status, ownership, or control requirements of 49 CFR Part 26, 49 CFR Part 23 (for airport concessionaires) and 13 CFR Part 121. I swear there have been no material changes in the information provided with insert name of DBE/ACDBE firm application for certification, except for any changes about which I have provided written notice to City of St. Louis (LAMBERT-ST. LOUIS INTERNATIONAL AIRPORT®) pursuant to 49 CFR § 26.83(i).

I swear that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified in 49 CFR § 26.5, without regard to my individual qualities. I further swear that my personal net worth does not exceed \$1,320,000.00, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I specifically swear that insert name of DBE/ACDBE firm continues to meet the Small Business Administration (SBA) business size criteria and the overall gross receipts cap of 49 CFR Part 26 and Part 23 (for airport concessionaires). I have provided the attached size and gross receipts documentation to support this affidavit.

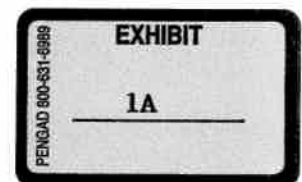
Signature \_\_\_\_\_ Date \_\_\_\_\_

State of \_\_\_\_\_, City/County of \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me appeared (name) \_\_\_\_\_, to me personally known, who, being duly sworn, did execute the foregoing affidavit and did state that he or she was properly authorized by (name of firm) \_\_\_\_\_, to execute the affidavit and did so as his or her free act and deed.

(SEAL/STAMP)

Notary Public \_\_\_\_\_ Commission Expires \_\_\_\_\_



<sup>1</sup> Knowingly and willfully providing false information to the Federal government is a violation of 18 U.S.C. Section 1001 (False Statements) and could subject you to fines, imprisonment or both.

**CITY OF ST. LOUIS**

**MRCC MEMBER AGENCY M/WBE RELEASE**

[\_\_\_\_\_] does hereby authorize  
INSERT NAME OF COMPANY

[\_\_\_\_\_] to release to the City of St. Louis all information  
NAME OF MRCC AGENCY (i.e. METRO, MoDOT, City of Kansas City or KCATA)

obtained by [\_\_\_\_\_] for the purpose of certifying  
NAME OF MRCC AGENCY

[\_\_\_\_\_] as a Minority Business Enterprise (MBE)  
INSERT NAME OF COMPANY

and/or Women Business Enterprise (WBE).

This authorization allows for full disclosure of all such information including, but not limited to, financial statements, statements of certification, investigation reports, names of employees and numbers of employees. All information will be disclosed unless you specify, in writing, information you wish to be excluded.

The City of St. Louis may use this information for the sole purpose of evaluating whether [\_\_\_\_\_] qualifies as a Minority Business Enterprise (MBE) and/or Women Business Enterprise (WBE) under the City of St. Louis' guidelines.  
INSERT NAME OF COMPANY

The City of St. Louis may not use this information for any other purpose without prior, written authorization from [\_\_\_\_].  
INSERT NAME OF COMPANY

The City of St. Louis may not disclose this information to any third party without prior, written authorization from [\_\_\_\_].  
INSERT NAME OF COMPANY

This authorization is valid for one year from the date of signature.

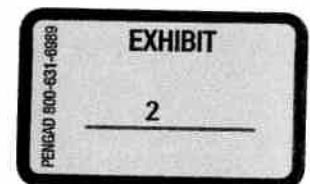
\_\_\_\_\_  
[Print Name of Owner/Principal of Firm]

\_\_\_\_\_  
Signature before a Notary:

Title: \_\_\_\_\_

Date: \_\_\_\_\_

(Notary Seal here)





Date

«FirstName» «LastName»  
«Firm»  
«Address»  
«City», «State» «Zip»

CERTIFICATION #: «CertifNo»  
EFFECTIVE DATE: «CertifDate»

RE: MBE/WBE CERTIFICATION APPROVAL

Dear «Salutation» «LastName»:

The St. Louis Airport Authority (SLAA) is pleased to notify you that your firm meets the requirements for certification «DBEMBEWBESStatus», in accordance with the policies of the MBE/WBE Program.

Your certification number and the effective date of your certification are noted above. Work done by your firm will count toward applicable «DBEMBEWBESStatus» participation goals only if your firm performs a commercially useful function, is responsible for a distinct element of the work of a contract, and carries out its responsibilities by actually performing, managing and supervising the work.

If there are any changes in the ownership, control, mailing address, e-mail address, telephone number or fax number of your firm, you must notify this office immediately. Failure to report any of these changes to this office and/or any violation of the policies and procedures of this program may result in the revocation of your certification.

This certification is renewable in Five years on «ThirdYrRenewalDate». Renewal forms will be sent to you at least 90 days prior to the renewal date of your certification. However on the anniversary dates prior to each fifth year, you must submit to the SLAA a signed and notarized affidavit, affirming that there have been no changes in the firm's circumstances affecting its ability to meet the requirements for certification. An Annual Update Affidavit will be sent to you prior to the above referenced anniversary dates. **It is your responsibility to ensure that your firm's certification remains current.**

Your firm's name has been incorporated in our online directory of the Directory of Disadvantaged, Minority & Women Owned Businesses. Our website address is [www.mwdbe.org](http://www.mwdbe.org), which is utilized by city departments, airport's tenants, and all firms bidding on city and airport contracts.

Based on the information you provided, your firm will be listed under the following areas of expertise:

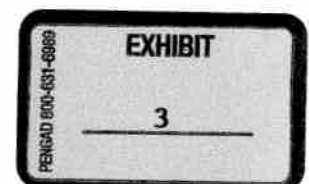
AREAS OF EXPERTISE: «Speciality»

The City, SLDC, the Authority and the Program make no representations, warranties, or guarantees, including representations, warranties or guarantees to any third party, as to the quality of work to be or previously performed by any M/WBE and further make no representations, warranties or guarantees as to the quality, experience, capabilities or qualifications of any M/WBE or any of the persons associated therewith. The City, SLDC and the Program make no representations, warranties, or guarantees, whatsoever as to whether any M/WBE shall be the recipient of any part of any City Contracting Opportunities.

We welcome your participation and wish you every success.

Very truly yours,

Jackie Taylor  
Certification Manager



**City of St. Louis**  
**Minority Business Enterprise (MBE)/ Women Business Enterprise (WBE) Program**  
**Request for Area of Expertise Review**

Name of Firm:		
Street Address:		
City:	State:	Zip:

Additional type of work requested:


List and attach documentation of the 5 largest contracts or supply invoices completed for the additional type of work requested.

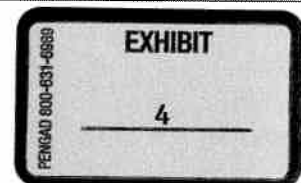
Owner/Contractor	Phone	Contract Amount	Project Name/Location	Type of Work Performed

List all equipment you own or lease used to perform the additional type of work requested. Copies of current lease agreements or proof of payment must be attached.

Type of Equipment	Make	Model	Year	Date Acquired	Present Value

Please attach any other documentation or information relevant to the additional type of work your firm is requested. This can include documentation of technical licenses, leases of property or facilities, training or expertise.

Signature	
Printed name	
Title	
Date	



## MBE/WBE Affidavit for Certification in Additional Area(s) of Expertise

A MATERIAL OR FALSE STATEMENT MADE IN CONNECTION WITH THIS REQUEST FOR NAICS CODE REVIEW IS SUFFICIENT CAUSE FOR REMOVAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, CANCELLATION OF ANY CONTRACTS OR SUBCONTRACTS, SUSPENSION OR DEBARMENT, AND MAY SUBJECT THE PERSON OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PENALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.

I, \_\_\_\_\_ (Full Name), swear or affirm under penalty of law that I am \_\_\_\_\_ (Title), of Firm, \_\_\_\_\_ (Firm Name), and that the foregoing statements are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities, and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted with this request is for the purpose of inducing approval by the City of St. Louis Airport Authority for certification in additional areas of expertise. I authorize the St. Louis Airport Authority to determine the accuracy of such information by contacting any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's additional areas of expertise.

I understand and agree to comply with policies and procedures, and the City of St. Louis Airport Authority must grant certification to my firm only for specific types of work in which the minority and/or women owners have the ability to control the firm. To become certified in an additional area of expertise outside of the three-year renewal process, the MBE/WBE firm must demonstrate that the MBE and/or WBE has the ability to manage and control work in the additional area(s) of expertise.

I agree to submit to audits, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its place(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial and/or revocation of certification.

I agree to furnish written notice to the City of St. Louis Airport Authority of any material change in the information contained in the original application and/or my request for additional areas of expertise within 30 days of such change (ex: ownership, address, telephone number, etc.).

I acknowledge and declare under penalties of Federal and State laws that the foregoing is true and correct.

\_\_\_\_\_  
Signature (Chief Executive Officer or Principal Owner)

Subscribed and sworn before me this \_\_\_\_\_ Day of \_\_\_\_\_ 20 \_\_\_\_

Signed \_\_\_\_\_  
Notary Signature

My Commission Expires \_\_\_\_\_

SEAL

# MBE/WBE STANDARD CERTIFICATION APPLICATION

## CITY OF ST. LOUIS

### MINORITY/WOMEN BUSINESS ENTERPRISE PROGRAM STANDARD CERTIFICATION APPLICATION

This application is to be used only to apply for MBE and WBE certification with the City of St. Louis. The company submitting the application must be at least fifty-one percent (51%) owned and managed by one or more women and/or minority individuals with U.S. citizenship or lawfully admitted permanent residence of the U.S. Your firm must be a for-profit business. Please place a check mark in the space next to the appropriate designations that you wish to apply.

\_\_\_ Minority Business Enterprise (MBE)

\_\_\_ Women Business Enterprise (WBE)

**You must complete and submit this application to the City of St. Louis and also provide proof that your firm is a local firm within the St. Louis Metropolitan Statistical Area (SLMSA), in order to meet the requirements for the MBE/WBE program.**

**What is your preferred method of correspondence?**

**Please check:** \_\_\_ Mail \_\_\_ Fax \_\_\_ E-mail

Send your completed application package to the following address:

**City of St. Louis (MBE/WBE Program)**  
**Lambert-St. Louis International Airport®**  
**DBE Program Office**  
**P. O. Box 10212**  
**St. Louis, MO 63145**

**Website: www.mwdbe.org**  
**Office (314) 426-8111**  
**Fax (314) 890-1305**

#### ROADMAP FOR APPLICANTS

##### 1. Should I apply?

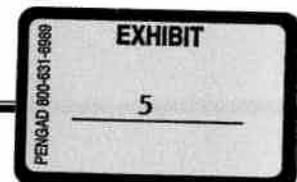
- Is your firm at least 51% owned by minority group individual(s) or women who also control the firm?
- Is the minority or woman owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
- Is your firm organized as a for-profit business?

⇒ If you answered **"Yes"** to all of the questions above, you may be eligible to participate in the MBE/WBE program.

**NOTE:** You must complete and submit this application to the City of St. Louis and also provide proof that your firm is a local firm in order to meet the requirements for the MBE/WBE program.

2. Be sure to answer all questions as completely as possible; use additional paper when answers require more space, properly identifying the item referred to by the appropriate number; and **attach all of the required documents** listed on the **Documents Check List** at the end of this form with your completed application.

3. Where can I find more information?
- www.mwdbe.org



# MBE/WBE STANDARD CERTIFICATION APPLICATION

## Section 1: M/WBE CERTIFICATION APPLICATION

<b>A. Prior/Other Certifications</b>	
Is your firm currently certified for any of the following programs? <i>(If Yes, check appropriate box(s))</i>  <input type="checkbox"/> DBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> 8a	Name of certifying agency: _____  Has the agency conducted an on-site visit? <input type="checkbox"/> Yes, on ____ / ____ / ____ State: _____  <input type="checkbox"/> No
<b>B. Prior/Other Applications and Privileges</b>	
Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application from any of the programs listed above, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?  <input type="checkbox"/> No <span style="margin-left: 100px;"><input type="checkbox"/> Yes, on ____ / ____ / ____</span> If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action: _____	

## Section 2: GENERAL INFORMATION

<b>A. Contact Information</b>			
(1) Key Contact(s) Name (preferably owner/principal): _____		(2) Legal name of firm: _____	
Title: _____			
(3) Phone #: _____	(4) Alternate Phone #: _____	(5) Fax #: _____	
(6) E-mail address: _____		(7) Website (if applicable): _____	
(8) Street address of firm (No P.O. Box): _____		City: _____	County: _____
		State: _____	Zip: _____
(9) Mailing address of firm (if different): _____		City: _____	County: _____
		State: _____	Zip: _____
<b>B. Business Profile</b>			
(1) Describe in detail the company's product(s), service(s), or business type: If necessary, attach additional paper to describe your firm if it offers more than one product/service.		(2) Federal Tax ID (if any): _____	
(3) Date firm established: ____ / ____ / ____		(4) Date you owned this firm: ____ / ____ / ____	
(5) Method of acquisition <i>(check all that apply)</i> :			
<input type="checkbox"/> Started new business <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other (explain) _____ <input type="checkbox"/> Bought existing business <input type="checkbox"/> Secured concession <input type="checkbox"/> Inherited business			
(6) Is your firm "for profit"?			<input type="checkbox"/> Yes <input type="checkbox"/> No
☒ <b>STOP!</b> If your firm is <b><u>NOT</u></b> for-profit, then you <b><u>DO NOT</u></b> qualify for this program and <b><u>DO NOT</u></b> need to fill out this application.			
(7) Type of firm:			
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Liability Company or Corporation (LLC) <input type="checkbox"/> General Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Partnership			

## MBE/WBE STANDARD CERTIFICATION APPLICATION

(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, explain:					
(9) Number of employees:		Full-time:	Part-time:	Total:	
(10) Specify the gross receipts of the firm for the last 3 years:					
Year		Total receipts	\$		
Year		Total receipts	\$		
Year		Total receipts	\$		
<b>C. Relationships with Other Businesses</b>					
(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity? If Yes, identify:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm's Name		Nature of shared facilities			
(2) At present, or at any time in the past, has your firm:					
(a) Been a subsidiary of any other firm?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
(b) Consisted of a partnership in which one or more of the partners are part of another firm(s)?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
(c) Owned any percentage of any other firm(s)?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
(d) Had any subsidiaries?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
(3) Has any other firm had any ownership interest in your firm, at present or at any time in the past?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each ( <i>attach extra sheets, if needed</i> ):					
Name	Address	Type of Business			
1.					
2.					
3.					
<b>D. Immediate Family Member Businesses</b>					
Do any of your immediate family members own or manage another company? If Yes, then list ( <i>attach extra sheets, if needed</i> ):				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Name	Relationship	Company	Type of Business	Own or Manage?	
1.					
2.					
3.					

# MBE/WBE STANDARD CERTIFICATION APPLICATION

## Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below  
(If more than one owner, attach separate sheets for each additional owner):

<b>A. Background Information</b>						
(1) Name:		(2) Title:		(3) Home Phone #:		
(4) Home Address ( <i>street and number</i> ):			City:	State:	Zip:	
(5) Gender:	<input type="checkbox"/> Female	<input type="checkbox"/> Male	(6) Ethnic group membership ( <i>Check all that apply</i> ):			
(7) U.S. Citizen:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Black	<input type="checkbox"/> Native American		
			<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian Pacific		
(8) Lawfully Admitted Permanent Resident:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Other ( <i>specify</i> )	<input type="checkbox"/> Subcontinent Asian		
<b>B. Ownership Interest</b>						
(1) Number of years as owner:			(2) Initial investment to acquire ownership interest in firm:			
(3) Percentage owned:			Type	Dollar Value		
(4) Familial relationship to other owners:			<input type="checkbox"/> Cash	\$		
			<input type="checkbox"/> Real Estate	\$		
			<input type="checkbox"/> Equipment	\$		
			<input type="checkbox"/> Other	\$		
(5) Shares of Stock:						
Number	Percentage	Class	Date Acquired	Method Acquired		
(6) Does this owner perform a management or supervisory function for any other business? If Yes, identify:					<input type="checkbox"/> No	<input type="checkbox"/> Yes
Name of Business			Function/Title			
(7) Does this owner own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify:					<input type="checkbox"/> No	<input type="checkbox"/> Yes
Name of Business		Function/Title		Nature of Business Relationship		
<b>C. Trust</b>						
<b>NOTE: Complete this section for each owner applying for MBE and/or WBE qualification</b>						
(1) Has any trust been created for the benefit of this disadvantaged owner(s)?					<input type="checkbox"/> No	<input type="checkbox"/> Yes
If Yes, explain ( <i>attach additional sheets if needed</i> ):						

# MBE/WBE STANDARD CERTIFICATION APPLICATION

## Section 4: Control

<b>A. Identify your firm's Officers &amp; Board of Directors (attach additional sheets if needed):</b>					
		<b>Title</b>	<b>Date Appointed</b>	<b>Ethnicity</b>	<b>Gender</b>
<b>(1) Officers of the Company</b>	(a)				<input type="checkbox"/> M <input type="checkbox"/> F
	(b)				<input type="checkbox"/> M <input type="checkbox"/> F
	(c)				<input type="checkbox"/> M <input type="checkbox"/> F
<b>(2) Board of Directors</b>	(a)				<input type="checkbox"/> M <input type="checkbox"/> F
	(b)				<input type="checkbox"/> M <input type="checkbox"/> F
	(c)				<input type="checkbox"/> M <input type="checkbox"/> F
<b>(3) Managing Members (Limited Liability Company)</b>	(a)				<input type="checkbox"/> M <input type="checkbox"/> F
	(b)				<input type="checkbox"/> M <input type="checkbox"/> F
	(c)				<input type="checkbox"/> M <input type="checkbox"/> F
(3) Do any of the persons listed in (1), (2) and/or (3) above perform a management or supervisory function for any other business? If Yes, identify for each:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
<b>Person</b>		<b>Title</b>	<b>Business</b>	<b>Function</b>	
(4) Do any of the persons listed (1) and/or (2) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify for each:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm Name		Name of Person	Nature of Business Relationship		
<b>B. Identify your firm's management personnel who control your firm in the following areas (If more than two persons, attach additional sheets if needed):</b>					
	<b>Name</b>	<b>Title</b>	<b>Ethnicity</b>	<b>Gender</b>	
(1) Financial Decisions /Transactions (responsibility for acquisition of lines of credit, surety bonding, supplies, etc.)				<input type="checkbox"/> M <input type="checkbox"/> F	
(2) Estimating/Bidding				<input type="checkbox"/> M <input type="checkbox"/> F	
(3) Negotiating/Contract Execution				<input type="checkbox"/> M <input type="checkbox"/> F	
(4) Hiring/Firing of management personnel				<input type="checkbox"/> M <input type="checkbox"/> F	
(5) Field/Production Operations Supervisor				<input type="checkbox"/> M <input type="checkbox"/> F	
(6) Office management				<input type="checkbox"/> M <input type="checkbox"/> F	
(7) Marketing/Sales				<input type="checkbox"/> M <input type="checkbox"/> F	
(8) Purchasing of major equipment				<input type="checkbox"/> M <input type="checkbox"/> F	
(9) Authorized to Sign Company Checks (for any purpose)				<input type="checkbox"/> M <input type="checkbox"/> F	
(10) Determine jobs firm will take				<input type="checkbox"/> M <input type="checkbox"/> F	
(11) Do any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business? If Yes, identify for each:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Person Name		Title	Business	Function	



# MBE/WBE STANDARD CERTIFICATION APPLICATION

(12) Do any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm Name	Name of Person	Nature of Business Relationship		

**C. Indicate your firm's inventory in the following categories (attach additional sheets if needed):**

Equipment			
Type of Equipment	Make/Model	Current Value	Owned or Leased?
(a)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(b)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(c)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
Vehicles			
Type of Vehicle	Make/Model	Current Value	Owned or Leased?
(a)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(b)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(c)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
Office Space			
Street Address	Owned or Leased?	Current Value of Property or Lease	
(a)			
(b)			
Storage Space			
Street Address (If located at different address than listed above)	Owned or Leased?	Current Value of Property or Lease	
(a)	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		
(b)	<input type="checkbox"/> Owned <input type="checkbox"/> Leased		

<b>D. Does your firm rely on any other firm for management functions or employee payroll? If Yes, explain:</b>			<input type="checkbox"/> No	<input type="checkbox"/> Yes

E. Financial Information			
(1) Banking Information:			
(a) Name of Bank:	(b) Telephone Number:		
(c) Address of Bank:			
City:	State:	Zip Code:	
(2) Bonding Information:			
If you have bonding capacity, identify:	(a) Binder No:		
(b) Name of Agent/Broker:	(c) Telephone Number:		
(d) Address of Agent/Broker:			
City:	State:	Zip Code:	
(e) Bonding limit: Aggregate Limit	\$	Project Limit	\$

# MBE/WBE STANDARD CERTIFICATION APPLICATION

**F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner (attach additional sheets if needed):**

Name of Source	Address Of Source	Name of Person Securing Loan	Original Amount	Current Balance	Purpose Of Loan
1.					
2.					
3.					

**G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years (attach additional sheets if needed):**

Contribution/Asset	Dollar Value	From Whom Transferred	To Whom Transferred	Relationship	Date of Transfer
1.					
2.					
3.					

**H. List current licenses/permits held by any owner and/or employee of your firm (e. g. contractor, engineer, architect, etc.) (Attach additional sheets if needed):**

Name of License/Permit Holder	Type of License/Permit	Expiration Date	License Number & State
1.			
2.			
3.			
4.			

**I. List the three largest contracts completed by your firm in the past three years, if any:**

Name of Owner/Contractor	Name/Location of Project	Type of Work Performed	Dollar Value of Contract
1.			
2.			
3.			

**J. List the three largest active jobs on which your firm is currently working:**

Name of Prime Contractor & Project Number	Location of Project	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
1.					
2.					
3.					

# MBE/WBE STANDARD CERTIFICATION APPLICATION

## MBE/WBE AFFIDAVIT OF CERTIFICATION

*This form must be signed and notarized for each owner upon which minority and/or women status is relied.*

**A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PEALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (full name printed), swear or affirm under penalty of law that I am \_\_\_\_\_ (title) of applicant firm \_\_\_\_\_ (firm name) and that I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor, if any, and the City of St. Louis on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the City of St. Louis of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

I certify that I am a minority and/or woman individual who is an owner of the above-referenced firm seeking certification as a Minority Business Enterprise (WBE) and/or Women Business Enterprise (WBE). In support of my application, I certify that I am a member of one or more of the following groups, and that I have held myself out as a member of the group(s) (circle all that apply):

I declare, under penalty of perjury, that the information provided in this application and supporting documents is true and correct.

*Signature		*Signature	
Printed name		Printed name	
Title		Title	
Date		Date	

**\*Must be signed by the individual or individuals asserting minority or women.  
NOTARY PUBLIC**

On this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_ before me appeared \_\_\_\_\_  
and \_\_\_\_\_

who, being duly sworn, did execute the foregoing affidavit, and did state they were properly authorized by the above-named MBE and /or WBE firm to execute this affidavit, and that they did so as their free act and deed.

Signed \_\_\_\_\_ Notary Public  
My Commission expires:

# **MBE/WBE STANDARD CERTIFICATION APPLICATION**

## **MBE/WBE CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST**

You must include all of the appropriate documentation (listed below) with your application for MBE/WBE certification, and attach copies of all of the required documents listed below, as they apply to you and your firm. **Failure to submit a complete application package will result in delays and/or denial of certification.**

### **All Applicants**

- ☐ Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- ☐ Your firm's tax returns (gross receipts) and all related schedules for the past three years
- ☐ Documented proof of contributions used to acquire ownership for each owner (*e.g. both sides of cancelled checks*)
- ☐ Your firm's signed loan agreements, security agreements, and bonding forms
- ☐ Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- ☐ List of equipment leased and signed lease agreements
- ☐ List of construction equipment and/or vehicles owned and titles/proof of ownership
- ☐ Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- ☐ Year-end balance sheets and income statements for the past three years (*or life of firm, if less than three years*); a new business must provide a current balance sheet
- ☐ All relevant licenses, license renewal forms, permits, and haul authority forms
- ☐ DBE/MBE/WBE and SBA 8(a) or SDB certifications, denials, and/or de-certifications, if applicable
- ☐ Bank authorization and signatory cards
- ☐ Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- ☐ Trust agreements held by any owner claiming disadvantaged status, if any
- ☐ Executed contracts, agreements, work orders, etc. (provide at least three)

### **Sole Proprietorship**

- ☐ Fictitious Name Registration(s)

### **Partnership or Joint Venture**

- ☐ Original and any amended Partnership or Joint Venture Agreements

### **Corporation or LLC**

- ☐ Official Articles of Incorporation (*signed by the state official*)
- ☐ Both sides of all corporate stock certificates and your firm's stock transfer ledger
- ☐ Shareholders' Agreement
- ☐ Minutes of all stockholders and board of directors meetings
- ☐ Corporate by-laws and any amendments
- ☐ Corporate bank resolution and bank signature cards
- ☐ Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

### **Trucking Company**

- ☐ Documented proof of ownership of the company
- ☐ Insurance agreements for each truck owned or operated by your firm
- ☐ Title(s) and registration certificate(s) for each truck owned or operated by your firm
- ☐ List of U.S. DOT numbers for each truck owned or operated by your firm

### **Regular Dealer**

- ☐ Proof of warehouse ownership or lease
- ☐ List of product lines carried
- ☐ List of distribution equipment owned and/or leased

**Submit this checklist along with the certification application and the documentation listed above to the DBE Program Office, Lambert St. Louis International Airport, P. O. Box 10212, St. Louis, MO 63145.**

**UNIFORM CERTIFICATION APPLICATION**  
**FOR MBE/WBE/DBE/ACDBE**

This application is to be used to apply for DBE, MBE, WBE and/or ACDBE certification with the City of St. Louis. Please place a check mark in the space next to the appropriate designations that you wish to apply for.

- ☐ Disadvantaged Business Enterprise (DBE)
- ☐ Minority Business Enterprise (MBE)
- ☐ Women Business Enterprise (WBE)
- ☐ Airport Concessions Disadvantaged Business Enterprise (ACDBE)

**\* Please note you must sign, notarize and submit the correct enclosed affidavit(s) based on your appropriate designation DBE, MBE, WBE and/or ACDBE.**

**What is your preferred method of correspondence?**

Please check ☐ Mail ☐ Fax ☐ E-mail

Send your completed application package to the following address:

City of St. Louis (DBE/MBE/WBE/ACDBE)  
Lambert-St. Louis International Airport®  
DBE Program Office  
P. O. Box 10212  
St. Louis, MO 63145  
Website: [www.mwdbe.org](http://www.mwdbe.org)  
Office (314) 426-8111  
Fax (314) 890-1305



Revised 7/2011

DISADVANTAGED BUSINESS ENTERPRISE PROGRAM  
49 C.F.R. PART 26

## UNIFORM CERTIFICATION APPLICATION

### ROADMAP FOR APPLICANTS

**1. Should I apply?**

- Is your firm at least 51%-owned by a socially and economically disadvantaged individual(s) who also controls the firm?
- Is the disadvantaged owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
- Is your firm a small business that meets the Small Business Administration's (SBA's) size standard and does not exceed \$17.42 million in gross annual receipts?
- Is your firm organized as a for-profit business?

⇒ If you answered "Yes" to all of the questions above, you may be eligible to participate in the U.S. DOT DBE program.

**2. Is there an easier way to apply?**

If you are currently certified by the SBA as an 8(a) and/or SDB firm, you may be eligible for a streamlined certification application process. Under this process, the certifying agency to which you are applying will accept your current SBA application package in lieu of requiring you to fill out and submit this form. **NOTE: You must still meet the requirements for the DBE program, including undergoing an on-site review.**

**3. Be sure to attach all of the required documents listed in the Documents Check List at the end of this form with your completed application.**

**4. Where can I find more information?**

- U.S. DOT – <http://osdbuweb.dot.gov/business/dbe/index.html> (this site provides useful links to the rules and regulations governing the DBE program, questions and answers, and other pertinent information)
- SBA – <http://www.ntis.gov/naics> (provides a listing of NAICS codes) and <http://www.sba.gov/size/indexableofsize.html> (provides a listing of SIC codes)
- 49 CFR Part 26 (the rules and regulations governing the DBE program)

Under Sec. 26.107 of 49 CFR Part 26, dated February 2, 1999, if at any time, the Department or a recipient has reason to believe that any person or firm has willfully and knowingly provided incorrect information or made false statements, the Department may initiate suspension or debarment proceedings against the person or firm under 49 CFR Part 29, take enforcement action under 49 CFR Part 31, Program Fraud and Civil Remedies, and/or refer the matter to the Department of Justice for criminal prosecution under 18 U.S.C. 1001, which prohibits false statements in Federal programs.

## Section 1: CERTIFICATION INFORMATION

<b>A. Prior/Other Certifications</b>		
Is your firm currently certified for any of the following programs? (If Yes, check appropriate box(s))	<input type="checkbox"/> DBE   <input type="checkbox"/> 8(a) <input type="checkbox"/> SDB	Name of certifying agency: _____  Has your firm's state UCP conducted an on-site visit? <input type="checkbox"/> No <input type="checkbox"/> Yes, on ____ / ____ / ____ State: _____  <input checked="" type="checkbox"/> <b>STOP!</b> If you checked either the 8(a) or SDB box, you <u>may not</u> have to complete this application. Ask your state UCP about the streamlined application process under the SBA-DOT MOU.
<b>B. Prior/Other Applications and Privileges</b>		
Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application for any of the programs listed above, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?  <div style="text-align: center;"> <input type="checkbox"/> No           <span style="margin-left: 100px;"><input type="checkbox"/> Yes, on ____ / ____ / ____</span> </div> If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action:		

## Section 2: GENERAL INFORMATION

<b>A. Contact Information</b>					
(1) Contact person: _____			(2) Legal name of firm: _____		
Title: _____					
(3) Phone #: _____		(4) Other Phone #: _____		(5) Fax #: _____	
(6) E-mail: _____			(7) Website (if applicable): _____		
(8) Street address of firm (No P.O. Box): _____		City: _____	County/Parish: _____	State: _____	Zip: _____
(9) Mailing address of firm (if different): _____		City: _____	County/Parish: _____	State: _____	Zip: _____
<b>B. Business Profile</b>					
(1) Describe the primary activities of your firm: _____				(2) Federal Tax ID (if any): _____	
(3) This firm was established on ____ / ____ / ____			(4) I/We have owned this firm since: ____ / ____ / ____		
(5) Method of acquisition (check all that apply):					
<input type="checkbox"/> Started new business		<input type="checkbox"/> Merger or consolidation		<input type="checkbox"/> Other (explain)	
<input type="checkbox"/> Bought existing business		<input type="checkbox"/> Secured concession			
<input type="checkbox"/> Inherited business					
(6) Is your firm "for profit"?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
<input checked="" type="checkbox"/> <b>STOP!</b> If your firm is <u>NOT</u> for-profit, then you do NOT qualify for this program and do NOT need to fill out this application.					

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(7) Type of firm: <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Joint Venture <input type="checkbox"/> Corporation <input type="checkbox"/> Other, Describe: <input type="checkbox"/> Limited Liability Partnership					
(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name?				Yes	No
If Yes, explain:					
(9) Number of employees:		Full-time	Part-time	Total	
(10) Specify the gross receipts of the firm for the last 3 years:					
Year		Total receipts	\$		
Year		Total receipts	\$		
Year		Total receipts	\$		
<b>C. Relationships with Other Businesses</b>					
(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity? If Yes, identify:				Yes	No
Firm's Name		Nature of shared facilities			
(2) At present, or at any time in the past, has your firm:					
(a) Been a subsidiary of any other firm?				Yes	No
(b) Consisted of a partnership in which one or more of the partners are other firm(s)?				Yes	No
(c) Owned any percentage of any other firm(s)?				Yes	No
(d) Had any subsidiaries?				Yes	No
(3) Has any other firm had any ownership interest in your firm, at present or at any time in the past?				Yes	No
(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each (attach extra sheets, if needed):					
Name		Address		Type of Business	
1.					
2.					
3.					
<b>D. Immediate Family Member Businesses</b>					
Do any of your immediate family members own or manage another company?				Yes	No
If Yes, then list (attach extra sheets, if needed):					
Name	Relationship	Company	Type of Business	Own or Manage?	
1.					
2.					
3.					



### Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below (If more than one owner, attach separate sheets for each additional owner):

<b>A. Background Information</b>					
(1) Name:		(2) Title:		(3) Home Phone #:	
(4) Home Address (street and number):				City:	State: Zip:
(5) Gender:	<input type="checkbox"/> Female	<input type="checkbox"/> Male	(6) Ethnic group membership (Check all that apply):		
(7) U.S. Citizen:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Black	<input type="checkbox"/> Native American	
			<input type="checkbox"/> Hispanic	<input type="checkbox"/> Asian Pacific	
(8) Lawfully Admitted Permanent Resident:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> Other (specify)	<input type="checkbox"/> Subcontinent Asian	
<b>B. Ownership Interest</b>					
(1) Number of years as owner:			(2) Initial investment to acquire ownership interest in firm:		
(3) Percentage owned:			Type	Dollar Value	
(4) Familial relationship to other owners:			<input type="checkbox"/> Cash	\$	
			<input type="checkbox"/> Real Estate	\$	
			<input type="checkbox"/> Equipment	\$	
			<input type="checkbox"/> Other	\$	
(5) Shares of Stock:					
Number	Percentage	Class	Date Acquired	Method Acquired	
(6) Does this owner perform a management or supervisory function for any other business? If Yes, identify:					
Name of Business			Function/Title		
(7) Does this owner own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify:					
Name of Business			Function/Title	Nature of Business Relationship	
<b>C. Disadvantaged Status</b>					
<b>NOTE:</b> Complete this section for each owner applying for DBE qualification (i.e. for each owner claiming to be socially and economically disadvantaged)					
(1) What is the Personal Net Worth (PNW) of the owner(s) applying for DBE qualification? (Use and attach the Personal Financial Statement form at the end of this application; attach additional sheets if more than one owner is applying)					
(2) Has any trust been created for the benefit of this disadvantaged owner(s)?				<input type="checkbox"/> No	<input type="checkbox"/> Yes

If Yes, explain (attach additional sheets if needed):

#### Section 4: CONTROL

##### A. Identify your firm's Officers & Board of Directors

(If additional space is required, attach a separate sheet):

Name		Title	Date Appointed	Ethnicity	Gender
(1) Officers of the Company	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
(2) Board of Directors	(a)				
	(b)				
	(c)				
	(d)				
	(e)				
(3) Do any of the persons listed in (1) and/or (2) above perform a management or supervisory function for any other business? If Yes, identify for each:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Person		Title	Business	Function	
(4) Do any of the persons listed (1) and/or (2) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify for each:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm Name		Person	Nature of Business Relationship		

##### B. Identify your firm's management personnel who control your firm in the following areas (If more than two persons, attach a separate sheet):

	Name	Title	Ethnicity	Gender
(1) Financial Decisions (responsibility for acquisition of lines of credit, surety bonding, supplies, etc.)	a.			
	b.			
(2) Estimating and bidding	a.			
	b.			
(3) Negotiating and Contract Execution	a.			
	b.			
(4) Hiring/firing of management personnel	a.			
	b.			
(5) Field/Production Operations Supervisor	a.			
	b.			
(6) Office management	a.			
	b.			
(7) Marketing/Sales	a.			
	b.			
(8) Purchasing of major equipment	a.			
	b.			
(9) Authorized to Sign Company	a.			

Checks (for any purpose)	b.			
(10) Authorized to make Financial Transactions	a.			
	b.			

11) Do any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
Person	Title	Business	Function	
12) Do any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm Name	Person	Nature of Business Relationship		
<b>C. Indicate your firm's inventory in the following categories (attach additional sheets if needed):</b>				
<b>Equipment</b>				
Type of Equipment	Make/Model	Current Value	Owned or Leased?	
(a)				
(b)				
(c)				
<b>Vehicles</b>				
Type of Vehicle	Make/Model	Current Value	Owned or Leased?	
(a)				
(b)				
(c)				
<b>Office Space</b>				
Street Address	Owned or Leased?	Current Value of Property or Lease		
(a)				
(b)				
<b>Storage Space</b>				
Street Address	Owned or Leased?	Current Value of Property or Lease		
(a)				
(b)				
D. Does your firm rely on any other firm for management functions or employee payroll? If Yes, explain:			<input type="checkbox"/> No	<input type="checkbox"/> Yes

<b>E. Financial Information</b>					
<b>(1) Banking Information:</b>					
(a) Name of Bank:			(b) Telephone Number:		
(c) Address of Bank:					
City:			State:	Zip Code:	
<b>(2) Bonding Information:</b>					
If you have bonding capacity, identify:			(a) Binder No:		
(b) Name of Agent/Broker:			(c) Telephone Number:		
(d) Address of Agent/Broker:					
City:			State:	Zip Code:	
(e) Bonding limit: Aggregate Limit		\$	Project Limit	\$	
<b>F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner:</b>					
Name of Source	Address Of Source	Name of Person Securing Loan	Original Amount	Current Balance	Purpose Of Loan
1.					
2.					
3.					
<b>G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years (attach additional sheets if needed):</b>					
Contribution/Asset	Dollar Value	From Whom Transferred	To Whom Transferred	Relationship	Date of Transfer
1.					
2.					
3.					
<b>H. List current licenses/permits held by any owner and/or employee of your firm (e.g. contractor, engineer, architect, etc.) (Attach additional sheets if needed):</b>					
Name of License/Permit Holder	Type of License/Permit		Expiration Date	License Number & State	
1.					
2.					
3.					
<b>I. List the three largest contracts completed by your firm in the past three years, if any:</b>					
Name of Owner/Contractor	Name/Location of Project	Type of Work Performed	Dollar Value of Contract		
1.					
2.					
3.					

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<b>J. List the three largest active jobs on which your firm is currently working:</b>					
Name of Prime Contractor & Project Number	Location of Project	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
1.					
2.					
3.					

**DBE/ACDBE  
AFFIDAVIT OF CERTIFICATION**

*This form must be signed and notarized for each owner upon which disadvantaged status is relied.*

**A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PEALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (full name printed), swear or affirm under penalty of law that I am \_\_\_\_\_ (title) of applicant firm \_\_\_\_\_ (firm name) and that I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor, if any, and the Department, recipient agency, or federal funding agency on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the recipient agency or Unified Certification Program (UCP) of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

I certify that I am a socially and economically disadvantaged individual who is an owner of the above-referenced firm seeking certification as a Disadvantaged Business Enterprise (DBE). In support of my application, I certify that I am a member of one or more of the following groups, and that I have held myself out as a member of the group(s) (mark all that apply):

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Female                | <input type="checkbox"/> Black American          | <input type="checkbox"/> Hispanic American           |
| <input type="checkbox"/> Native American       | <input type="checkbox"/> Asian- Pacific American | <input type="checkbox"/> Subcontinent Asian American |
| <input type="checkbox"/> Other (specify) _____ |  |  |

I certify that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified above, without regard to my individual qualities.

I further certify that my personal net worth does not exceed \$1,320,000, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

I declare, under penalty of perjury, that the information provided in this application and supporting documents is true and correct.

*Signature		*Signature	
Printed name		Printed name	
Title		Title	
Date		Date	

**\*Must be signed by the individual or individuals asserting disadvantaged status.**

## NOTARY PUBLIC

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ before me appeared \_\_\_\_\_  
and \_\_\_\_\_, who, being duly sworn, did execute  
the fore-going affidavit, and did state they were properly authorized by the above-named DBE firm to execute this affidavit,  
and that they did so as their free act and deed.

Signed \_\_\_\_\_ Notary Public.

My Commission expires:



<p><b>DBE UNIFORM CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST</b>  <b>In order to complete your application for DBE certification, you must attach copies of all of the following documents as they apply to you and your firm.</b></p>
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**All Applicants**

- ☐ Complete Certification Application along with signed and notarized DBE and/or MBE/WBE Affidavits
- ☐ Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- ☐ Personal Financial Statement (form available with this application)
- ☐ Personal tax returns for the past three years, if applicable, for each owner claiming disadvantaged status
- ☐ Your firm's tax returns (gross receipts) and all related schedules for the past three years
- ☐ Documented proof of contributions used to acquire ownership for each owner (*e.g. both sides of cancelled checks*)
- ☐ Your firm's signed loan agreements, security agreements, and bonding forms
- ☐ Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- ☐ List of equipment leased and signed lease agreements
- ☐ List of construction equipment and/or vehicles owned and titles/proof of ownership
- ☐ Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- ☐ Year-end balance sheets and income statements for the past three years (or life of firm, if less than three years); a new business must provide a current balance sheet
- ☐ All relevant licenses, license renewal forms, permits, and haul authority forms
- ☐ DBE and SBA 8(a) or SDB certifications, denials, and/or decertifications, if applicable
- ☐ Bank authorization and signatory cards
- ☐ Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- ☐ Trust agreements held by any owner claiming disadvantaged status, if any

**Partnership or Joint Venture**

- ☐ Original and any amended Partnership or Joint Venture Agreements

**Corporation or LLC**

- ☐ Official Articles of Incorporation (signed by the state official)
- ☐ Both sides of all corporate stock certificates and your firm's stock transfer ledger
- ☐ Shareholders' Agreement
- ☐ Minutes of all stockholders and board of directors meetings
- ☐ Corporate by-laws and any amendments
- ☐ Corporate bank resolution and bank signature cards
- ☐ Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

**Trucking Company**

- ☐ Documented proof of ownership of the company
- ☐ Insurance agreements for each truck owned or operated by your firm
- ☐ Title(s) and registration certificate(s) for each truck owned or operated by your firm
- ☐ List of U.S. DOT numbers for each truck owned or operated by your firm

**Regular Dealer**

- ☐ Proof of warehouse ownership or lease
- ☐ List of product lines carried
- ☐ List of distribution equipment owned and/or leased

**NOTE:** The specific state UCP to which you are applying may have additional required documents that you must also supply with your application. Contact the appropriate certifying agency to which you are applying to find out if more is required.



**Missouri Regional Certification Committee  
Disadvantaged Business Enterprise**

**Personal Financial Statement**      As of \_\_\_\_\_, \_\_\_\_\_

Complete this form for: each disadvantaged proprietor, or (2) each limited partner who owns 51% or more interest and each general partner, or (3) each stockholder owning 51% or more of voting stock, or (4) any person or entity providing a guaranty on the loan.

Name		Business Phone	
Residence Address		Residence Phone	
City, State and Zip Code			
Name of Business			

ASSETS (Omit Cents)		LIABILITIES (Omit Cents)	
Cash on hand and in bank(s)	\$	Accounts Payable	\$
Savings Accounts	\$	Notes Payable to Banks and Others:	\$ (Describe in Section 2)
IRA or Other Retirement Accounts	\$	Installment Account (Auto) Monthly Payments	\$ \$
Accounts & Notes Receivable	\$	Installment Account (Other) Monthly Payments	\$ \$
Life Insurance-Cash Surrender Value Only	\$ (Complete Section 8)	Loan on Life Insurance	\$
Stocks and Bonds	\$ (Describe in Section 3)	Mortgages on Real Estate	\$ (Describe in Section 4)
Real Estate	\$ (Describe in Section 4)	Unpaid Taxes	\$ (Describe in Section 6)
Automobile(s)-Present Value	\$	Other Liabilities	\$ (Describe in Section 7)
Other Personal Property	\$ (Describe in Section 5)		
Other Assets	\$ (Describe in Section 5)		
<b>Total Assets</b>	<b>\$</b>	<b>Total Liabilities</b>	<b>\$</b>
		<b>TOTAL NET WORTH</b> (Assets – Liabilities)	<b>\$</b>

Section 1. Source of Income		Contingent Liabilities	
Salary	\$	As Endorser or Co-Maker	\$
Net Investment Income	\$	Legal Claims and Judgments	\$
Real Estate Income	\$	Provision for Federal Income Tax	\$
Other Income (Describe below)	\$	Other Special Debt	\$

<b>Description of Other Income in Section 1.</b>

Section 2. Notes Payable to Bank and Others. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

Section 3. Stocks and Bonds. (Use attachment if necessary. Each attachment must be identified as a part of this PNW Statement and must be signed.)					
Number of Shares	Name of Securities	Cost	Market Value Quotation/ Exchange	Date of Quotation/ Exchange	Total Value

Section 4. Real Estate Owned. (List each parcel separately. Use attachments if necessary. Each attachment must be identified as a part of this PNW Statement and must be signed.)			
	Property A	Property B	Property C
Type of Property			
Address			
Date Purchased			
Original Cost			
Present Market Value			

Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment Per Month/Year (Specify)			
Status of Mortgage			
<b>Section 5. Other Personal Property and Other Assets.</b> (Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, Terms of payment, and if delinquent, describe delinquency)			
<b>Section 6. Unpaid Taxes.</b> (Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches).			

**Section 7. Other Liabilities.** (Describe in detail).

**Section 8. Life Insurance Held.**

(Give face amount and cash surrender value of policies - name of insurance company and beneficiaries).

I hereby certify that no assets have been transferred to any beneficiary for less than fair market value in the last two years. I authorize the Missouri Regional Certification Committee (MRCC) to verify the accuracy of the statements made in order to determine whether I meet the standards of economic disadvantage for participation in the DBE Program in the MRCC. These statements are true and correct to the best of my belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

State of \_\_\_\_\_  
County of \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission expires:

On this \_\_\_\_\_ of, \_\_\_\_\_, 20\_\_\_\_\_.

**INSTRUCTIONS FOR COMPLETING THE DISADVANTAGED BUSINESS ENTERPRISE (DBE)  
PROGRAM UNIFORM CERTIFICATION APPLICATION**

**NOTE:** If you require additional space for any question in this application, please attach additional sheets or copies as needed, taking care to indicate on each attached sheet/copy the section and number of this application to which it refers.

**Section 1: CERTIFICATION INFORMATION**

**A. Prior/Other Certifications**

Check the appropriate box indicating for which program your firm is currently certified. If you are already certified as a DBE, indicate in the appropriate box the name of the certifying agency that has previously certified your firm, and also indicate whether your firm has undergone an onsite visit. If your firm has already undergone an onsite visit/review, indicate the most recent date of that review and the state UCP that conducted the review.

**NOTE:** If your firm is currently certified under the SBA's 8(a) and/or SDB programs, you may not have to complete this application. You should contact your state UCP to find out about a streamlined application process for firms that are already certified under the 8(a) and SDB programs.

**B. Prior/Other Applications and Privileges**

Indicate whether your firm or any of the persons listed has ever withdrawn an application for a DBE program or an SBA 8(a) or SDB program, or whether any have ever been denied certification, decertified, debarred, suspended, or had bidding privileges denied or restricted by any state or local agency or Federal entity. If your answer is yes, indicate the date of such action, identify the name of the agency, and explain fully the nature of the action in the space provided.

**Section 2: GENERAL INFORMATION**

**A. Contact Information**

- (1) State the name and title of the person who will serve as your firm's primary contact under this application.
- (2) State the legal name of your firm, as indicated in your firm's Articles of Incorporation.
- (3) Indicate the primary phone number of your firm.
- (4) Indicate a secondary phone number, if any.
- (5) Indicate your firm's fax number, if any.
- (6) Indicate your firm's or your contact person's email address.
- (7) Indicate your firm's website address, if any.
- (8) State the street address of your firm (i.e. the physical location of its offices -- not a post office box address).
- (9) State the mailing address of your firm, if it is different from your firm's street address.

**B. Business Profile**

- (1) In the box provided, briefly describe the primary business and professional activities in which your firm engages.
- (2) Give the Federal Tax ID number of your firm as provided on your firm's filed tax returns, if you have one. This could also be the Social Security number of the owner of your firm.
- (3) Give the date on which your firm was officially established, as stated in your firm's Articles of Incorporation.

- (4) Give the date on which you and/or each other owner took ownership of the firm.

- (5) Check the appropriate box that describes the manner in which you and each other owner acquired ownership of your firm. If you checked "Other," explain in the space provided.

- (6) Check the appropriate box that indicates whether your firm is "for profit."

**NOTE:** If you checked "No," then you do NOT qualify for the DBE program and therefore do not need to complete the rest of this application. The DBE program requires all participating firms be for-profit enterprises.

- (7) Check the appropriate box that describes the legal form of ownership of your firm, as indicated in your firm's Articles of Incorporation. If you checked "Other," briefly explain in the space provided.

- (8) Check the appropriate box that indicates whether your firm has ever existed under different ownership, a different type of ownership, or a different name. If you checked "Yes," specify which and briefly explain the circumstances in the space provided.

- (9) Indicate in the spaces provided how many employees your firm has, specifying the number of employees who work on a full-time and part-time basis.

- (10) Specify the total gross receipts of your firm for each of the past three years, as declared in your firm's filed tax returns.

**C. Relationships with Other Businesses**

- (1) Check the appropriate box that indicates whether your firm is co-located at any of its business locations, or whether your firm shares a telephone number(s), a post office box, any office space, a yard, warehouse, other facilities, any equipment, or any office staff with any other business, organization, or entity of any kind. If you answered "Yes," then specify the name of the other firm(s) and briefly explain the nature of the shared facilities or other items in the space provided.

- (2) Check the appropriate box that indicates whether at present, or at any time in the past:

(a) your firm has been a subsidiary of any other firm;

(b) your firm consisted of a partnership in which one or more of the partners are other firms;

(c) your firm has owned any percentage of any other firm; and

(d) your firm has had any subsidiaries of its own.

- (3) Check the appropriate box that indicates whether any other firm has ever had an ownership interest in your firm.

- (4) If you answered "Yes" to any of the questions in (2)(a)-(d) or (3), identify the name, address and type of business for each.

**D. Immediate Family Member Businesses**

Check the appropriate box that indicates whether any of your immediate family members own or manage another company. An "immediate family member" is any person who is your father, mother, husband, wife, son, daughter, brother, sister, grandmother, grandfather, grandson, granddaughter, mother-in-law, or father-in-law. If you answered "Yes," provide the name of each relative, your relationship to them, the name of the company they own or manage, the type of business, and whether they own or manage the company.

**Section 3: OWNERSHIP**

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below (if your firm has more than one owner, provide completed copies of this section for each additional owner):

**A. Background Information**

- (1) Give the name of the owner.
- (2) State his/her title or position within your firm.
- (3) Give his/her home phone number.
- (4) State his/her home (street) address.
- (5) Check the appropriate box that indicates this owner's gender.
- (6) Check the appropriate box that indicates this owner's ethnicity (check all that apply). If you checked "Other," specify this owner's ethnic group/identity not otherwise listed.
- (7) Check the appropriate box to indicate whether this owner is a U.S. citizen.
- (8) If this owner is not a U.S. citizen, check the appropriate box that indicates whether this owner is a lawfully admitted permanent resident. If this owner is neither a U.S. citizen nor a lawfully admitted permanent resident of the U.S., then this owner is NOT eligible for certification as a DBE owner. This, however, does not necessarily disqualify your firm altogether from the DBE program if another owner is a U.S. citizen or lawfully admitted permanent resident and meets the program's other qualifying requirements.

**B. Ownership Interest**

- (1) State the number of years during which this owner has been an owner of your firm.
- (2) Indicate the dollar value of this owner's initial investment to acquire an ownership interest in your firm, broken down by cash, real estate, equipment, and/or other investment.
- (3) State the percentage of total ownership control of your firm that this owner possesses.
- (4) State the familial relationship of this owner to each other owner of your firm.
- (5) Indicate the number, percentage of the total, class, date acquired, and method by which this owner acquired his/her shares of stock in your firm.

- (6) Check the appropriate box that indicates whether this owner performs a management or supervisory function for any other business. If you checked "Yes," state the name of the other business and this owner's title or function held in that business.

- (7) Check the appropriate box that indicates whether this owner owns or works for any other firm(s) that has any relationship with your firm. If you checked "Yes," identify the name of the other business and this owner's title or function held in that business. Briefly describe the nature of the business relationship in the space provided.

**C. Disadvantaged Status**

**NOTE:** You only need to complete this section for each owner that is applying for DBE qualification (i.e. for each owner who is claiming to be "socially and economically disadvantaged" and whose ownership interest is to be counted toward the control and 51% ownership requirements of the DBE program)

- (1) Indicate in the space provided the total Personal Net Worth (PNW) of each owner who is applying for DBE qualification. Use the PNW calculator form at the end of this application to compute each owner's PNW.
- (2) Check the appropriate box that indicates whether any trust has ever been created for the benefit of this disadvantaged owner. If you answered "Yes," briefly explain the nature, history, purpose, and current value of the trust(s).

**Section 4: CONTROL**

**A. Identify your firm's Officers and Board of Directors:**

- (1) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each officer of your firm.
- (2) In the space provided, state the name, title, date of appointment, ethnicity, and gender of each individual serving on your firm's Board of Directors.
- (3) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above perform a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
- (4) Check the appropriate box that indicates whether any of your firm's officers and/or directors listed above own or work for any other firm(s) that has a relationship with your firm. If you answered "Yes," identify the name of the firm, the officer or director, and the nature of his/her business relationship with that other firm.

**B. Identify your firm's management personnel (by name, title, ethnicity, and gender) who control your firm in the following areas:**

- (1) Making of financial decisions on your firm's behalf, including the acquisition of lines of credit, surety bonds, supplies, etc.;
  - (2) Estimating and bidding, including calculation of cost estimates, bid preparation and submission;
  - (3) Negotiating and contract execution, including participation in any of your firm's negotiations and executing contracts on your firm's behalf;
  - (4) Hiring and/or firing of management personnel, including interviewing and conducting performance evaluations;
  - (5) Field/Production operations supervision, including site supervision, scheduling, project management services, etc.;
  - (6) Office management;
  - (7) Marketing and sales;
  - (8) Purchasing of major equipment;
  - (9) Signing company checks (for any purpose); and
  - (10) Conducting any other financial transactions on your firm's behalf not otherwise listed.
  - (11) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business. If you answered "Yes," identify each person by name, his/her title, the name of the other business in which s/he is involved, and his/her function performed in that other business.
  - (12) Check the appropriate box that indicates whether any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with your firm. If you answered "Yes," identify the name of the firm, the name of the person, and the nature of his/her business relationship with that other firm.
- C. Indicate your firm's inventory in the following categories:**
- (1) **Equipment**  
State the type, make and model, and current dollar value of each piece of equipment held and/or used by your firm. Indicate whether each piece is either owned or leased by your firm.
  - (2) **Vehicles**  
State the type, make and model, and current dollar value of each motor vehicle held and/or used by your firm. Indicate whether each vehicle is either owned or leased by your firm.
  - (3) **Office Space**  
State the street address of each office space held and/or used by your firm. Indicate whether your firm owns or leases the office space and the current dollar value of that property or its lease.
  - (4) **Storage Space**  
State the street address of each storage space held and/or used by your firm. Indicate whether your firm owns or leases the storage space and the current dollar value of that property or its lease.
- D. Does your firm rely on any other firm for management functions or employee payroll?**  
Check the appropriate box that indicates whether your firm relies on any other firm for management functions or for employee payroll. If you answered
- "Yes," briefly explain the nature of that reliance and the extent to which the other firm carries out such functions.
- E. Financial Information**
- (1) **Banking Information**
    - (a) State the name of your firm's bank.
    - (b) Give the main phone number of your firm's bank branch.
    - (c) Give the address of your firm's bank branch.
  - (2) **Bonding Information**
    - (a) State your firm's Binder Number.
    - (b) State the name of your firm's bond agent and/or broker.
    - (c) Give your agent's/broker's phone number.
    - (d) Give your agent's/broker's address.
    - (e) State your firm's bonding limits (in dollars), specifying both the Aggregate and Project Limits.
- F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of persons or firms securing the loan, if other than the listed owner:**  
State the name and address of each source, the original dollar amount and the current balance of each loan, and the purpose for which each loan was made to your firm.
- G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years:**  
Indicate in the spaces provided, the type of contribution or asset that was transferred, its current dollar value, the person or firm from whom it was transferred, the person or firm to whom it was transferred, the relationship between the two persons and/or firms, and the date of the transfer.
- H. List current licenses/permits held by any owner or employee of your firm.**  
List the name of each person in your firm who holds a professional license or permit, the type of permit or license, the expiration date of the permit or license, and the license/permit number and issuing State of the license or permit.
- I. List the three largest contracts completed by your firm in the past three years, if any.**  
List the name of each owner or contractor for each contract, the name and location of the projects under each contract, the type of work performed on each contract, and the dollar value of each contract.
- J. List the three largest active jobs on which your firm is currently working.**  
For each active job listed, state the name of the prime contractor and the project number, the location, the type of work performed, the project start date, the anticipated completion date, and the dollar value of the contract.
- AFFIDAVIT & SIGNATURE**  
Carefully read the attached affidavit in its entirety. Fill in the required information for each blank space, and sign and date the affidavit in the presence of a Notary Public, who must then notarize the form.





**LAMBERT-ST. LOUIS  
INTERNATIONAL AIRPORT®**

**MBE/WBE  
No Change Affidavit**



I insert name of MBE/WBE firm owner(s), swear that there have been no changes in insert name of MBE/WBE firm circumstances affecting its ability to meet the, ownership, or control requirements of the Mayor's Executive Order, as amended. I swear there have been no material changes in the information provided with insert name of MBE/WBE firm application for certification, except for any changes about which I have provided written notice to *City of St. Louis* (LAMBERT-ST. LOUIS INTERNATIONAL AIRPORT®). I have provided the attached gross receipts documentation to support this affidavit.

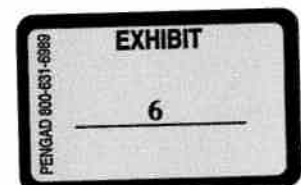
Signature \_\_\_\_\_ Date \_\_\_\_\_

State of \_\_\_\_\_, City/County of \_\_\_\_\_

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_, before me appeared (name) \_\_\_\_\_, to me personally known, who, being duly sworn, did execute the foregoing affidavit and did state that he or she was properly authorized by (name of firm) \_\_\_\_\_, to execute the affidavit and did so as his or her free act and deed.

(SEAL/STAMP)

Notary Public \_\_\_\_\_ Commission Expires \_\_\_\_\_



# FIVE YEAR M/WBE RENEWAL APPLICATION

## RENEWAL

### CITY OF ST. LOUIS

#### MINORITY/WOMEN BUSINESS ENTERPRISE PROGRAM STANDARD CERTIFICATION APPLICATION

This application is to be used only to apply for MBE and WBE certification with the City of St. Louis. The company submitting the application must be at least fifty-one percent (51%) owned and managed by one or more women and/or minority individuals with U.S. citizenship or lawfully admitted permanent residence of the U.S. Your firm must be a for-profit business. Please place a check mark in the space next to the appropriate designations that you wish to apply.

☐ Minority Business Enterprise (MBE)

☐ Women Business Enterprise (WBE)

**You must complete and submit this application to the City of St. Louis and also provide proof that your firm is a local firm within the St. Louis Metropolitan Statistical Area (SLMSA), in order to meet the requirements for the MBE/WBE program.**

**What is your preferred method of correspondence?**

**Please check:** ☐ Mail ☐ Fax ☐ E-mail

Send your completed application package to the following address:

**City of St. Louis (MBE/WBE Program)  
Lambert-St. Louis International Airport®  
DBE Program Office  
P. O. Box 10212  
St. Louis, MO 63145**

**Website: www.mwdbe.org**

**Office (314) 426-8111**

**Fax (314) 890-1305**

#### ROADMAP FOR APPLICANTS

**1. Should I apply?**

- ☐ Is your firm at least 51% owned by minority group individual(s) or women who also control the firm?
- ☐ Is the minority or woman owner a U.S. citizen or lawfully admitted permanent resident of the U.S.?
- ☐ Is your firm organized as a for-profit business?

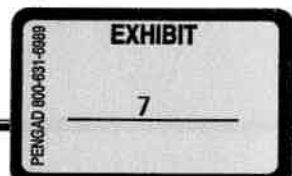
⇒ If you answered "**Yes**" to all of the questions above, you may be eligible to participate in the MBE/WBE program.

**NOTE:** You must complete and submit this application to the City of St. Louis and also provide proof that your firm is a local firm in order to meet the requirements for the MBE/WBE program.

- 2. Be sure to answer all questions as completely as possible; use additional paper when answers require more space, properly identifying the item referred to by the appropriate number; and attach all of the required documents listed on the **Documents Check List** at the end of this form with your completed application.**

**3. Where can I find more information?**

- ☐ www.mwdbe.org



# FIVE YEAR M/WBE RENEWAL APPLICATION

## Section 1: M/WBE CERTIFICATION APPLICATION RENEWAL

<b>A. Prior/Other Certifications</b>	
Is your firm currently certified for any of the following programs? <i>(If Yes, check appropriate box(s))</i>  <input type="checkbox"/> DBE <input type="checkbox"/> MBE <input type="checkbox"/> WBE <input type="checkbox"/> 8a	Name of certifying agency: _____  Has the agency conducted an on-site visit? <input type="checkbox"/> Yes, on ____ / ____ / ____ State: _____  <input type="checkbox"/> No
<b>B. Prior/Other Applications and Privileges</b>	
Has your firm (under any name) or any of its owners, Board of Directors, officers or management personnel, ever withdrawn an application from any of the programs listed above, or ever been denied certification, decertified, or debarred or suspended or otherwise had bidding privileges denied or restricted by any state or local agency, or Federal entity?  <input type="checkbox"/> No <span style="margin-left: 100px;"><input type="checkbox"/> Yes, on ____ / ____ / ____</span> If Yes, identify State and name of state, local, or Federal agency and explain the nature of the action:	

## Section 2: GENERAL INFORMATION

<b>A. Contact Information</b>				
(1) Key Contact(s) Name (preferably owner/principal):		(2) Legal name of firm:		
Title:				
(3) Phone #:	(4) Alternate Phone #:	(5) Fax #:		
(6) E-mail address:		(7) Website <i>(if applicable)</i> :		
(8) Street address of firm <i>(No P.O. Box)</i> :		City:	County:	State:      Zip:
(9) Mailing address of firm <i>(if different)</i> :		City:	County:	State:      Zip:
<b>B. Business Profile</b>				
(1) Describe in detail the company's product(s), service(s), or business type: If necessary, attach additional paper to describe your firm if it offers more than one product/service.			(2) Federal Tax ID (if any):	
(3) Date firm established: ____ / ____ / ____		(4) Date you owned this firm: ____ / ____ / ____		
(5) Method of acquisition <i>(check all that apply)</i> :				
<input type="checkbox"/> Started new business <input type="checkbox"/> Merger or consolidation <input type="checkbox"/> Other <i>(explain)</i> <input type="checkbox"/> Bought existing business <input type="checkbox"/> Secured concession <input type="checkbox"/> Inherited business				
(6) Is your firm "for profit"?			Yes	No
☒ <b>STOP!</b> If your firm is <b><u>NOT</u></b> for-profit, then you <b><u>DO NOT</u></b> qualify for this program and <b><u>DO NOT</u></b> need to fill out this application.				
(7) Type of firm:				
<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Limited Liability Company or Corporation (LLC) <input type="checkbox"/> General Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Partnership				

## FIVE YEAR M/WBE RENEWAL APPLICATION

(8) Has your firm ever existed under different ownership, a different type of ownership, or a different name?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, explain:					
(9) Number of employees:		Full-time:	Part-time:	Total:	
(10) Specify the gross receipts of the firm for the last 3 years:					
Year		Total receipts	\$		
Year		Total receipts	\$		
Year		Total receipts	\$		
<b>C. Relationships with Other Businesses</b>					
(1) Is your firm co-located at any of its business locations, or does it share a telephone number, P.O. Box, office space, yard, warehouse, facilities, equipment, or office staff, with any other business, organization, or entity? If Yes, identify:				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm's Name		Nature of shared facilities			
(2) At present, or at any time in the past, has your firm:					
(a) Been a subsidiary of any other firm?  (b) Consisted of a partnership in which one or more of the partners are part of another firm(s)?  (c) Owned any percentage of any other firm(s)?  (d) Had any subsidiaries?				<input type="checkbox"/> No  <input type="checkbox"/> No  <input type="checkbox"/> No  <input type="checkbox"/> No	<input type="checkbox"/> Yes  <input type="checkbox"/> Yes  <input type="checkbox"/> Yes  <input type="checkbox"/> Yes
(3) Has any other firm had any ownership interest in your firm, at present or at any time in the past?				<input type="checkbox"/> No	<input type="checkbox"/> Yes
(4) If you answered "Yes" to any of the questions in (2)(a)-(d) and/or (3), identify the following for each ( <i>attach extra sheets, if needed</i> ):					
Name	Address	Type of Business			
1.					
2.					
3.					
<b>D. Immediate Family Member Businesses</b>					
Do any of your immediate family members own or manage another company? If Yes, then list ( <i>attach extra sheets, if needed</i> ):				<input type="checkbox"/> No	<input type="checkbox"/> Yes
Name	Relationship	Company	Type of Business	Own or Manage?	
1.					
2.					
3.					

# FIVE YEAR M/WBE RENEWAL APPLICATION

## Section 3: OWNERSHIP

Identify all individuals or holding companies with any ownership interest in your firm, providing the information requested below  
(If more than one owner, attach separate sheets for each additional owner):

<b>A. Background Information</b>										
(1) Name:			(2) Title:			(3) Home Phone #:				
(4) Home Address (street and number):					City:		State:		Zip:	
(5) Gender:		<input type="checkbox"/> Female		<input type="checkbox"/> Male		(6) Ethnic group membership (Check all that apply):				
(7) U.S. Citizen:		<input type="checkbox"/> No		<input type="checkbox"/> Yes		<input type="checkbox"/> Black		<input type="checkbox"/> Native American		
						<input type="checkbox"/> Hispanic		<input type="checkbox"/> Asian Pacific		
(8) Lawfully Admitted Permanent Resident:		<input type="checkbox"/> No		<input type="checkbox"/> Yes		<input type="checkbox"/> Other (specify)		<input type="checkbox"/> Subcontinent Asian		
<b>B. Ownership Interest</b>										
(1) Number of years as owner:					(2) Initial investment to acquire ownership interest in firm:					
(3) Percentage owned:					Type			Dollar Value		
(4) Familial relationship to other owners:					<input type="checkbox"/> Cash			\$		
					<input type="checkbox"/> Real Estate			\$		
					<input type="checkbox"/> Equipment			\$		
					<input type="checkbox"/> Other			\$		
(5) Shares of Stock:										
<b>Number</b>		<b>Percentage</b>		<b>Class</b>		<b>Date Acquired</b>		<b>Method Acquired</b>		
(6) Does this owner perform a management or supervisory function for any other business? If Yes, identify:								<input type="checkbox"/> No		<input type="checkbox"/> Yes
<b>Name of Business</b>					<b>Function/Title</b>					
(7) Does this owner own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify:								<input type="checkbox"/> No		<input type="checkbox"/> Yes
Name of Business			Function/Title			Nature of Business Relationship				
<b>C. Trust</b>										
<b>NOTE: Complete this section for each owner applying for MBE and/or WBE qualification</b>										
(1) Has any trust been created for the benefit of this disadvantaged owner(s)?								<input type="checkbox"/> No		<input type="checkbox"/> Yes
If Yes, explain (attach additional sheets if needed):										

# FIVE YEAR M/WBE RENEWAL APPLICATION

## Section 4: Control

<b>A. Identify your firm's Officers &amp; Board of Directors (attach additional sheets if needed):</b>				
		<b>Title</b>	<b>Date Appointed</b>	<b>Ethnicity</b>
<b>(1) Officers of the Company</b>	(a)			<input type="checkbox"/> M <input type="checkbox"/> F
	(b)			<input type="checkbox"/> M <input type="checkbox"/> F
	(c)			<input type="checkbox"/> M <input type="checkbox"/> F
<b>(2) Board of Directors</b>	(a)			<input type="checkbox"/> M <input type="checkbox"/> F
	(b)			<input type="checkbox"/> M <input type="checkbox"/> F
	(c)			<input type="checkbox"/> M <input type="checkbox"/> F
<b>(3) Managing Members (Limited Liability Company)</b>	(a)			<input type="checkbox"/> M <input type="checkbox"/> F
	(b)			<input type="checkbox"/> M <input type="checkbox"/> F
	(c)			<input type="checkbox"/> M <input type="checkbox"/> F
(3) Do any of the persons listed in (1), (2) and/or (3) above perform a management or supervisory function for any other business? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
<b>Person</b>	<b>Title</b>	<b>Business</b>	<b>Function</b>	
(4) Do any of the persons listed (1) and/or (2) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm Name	Name of Person	Nature of Business Relationship		
<b>B. Identify your firm's management personnel who control your firm in the following areas (If more than two persons, attach additional sheets if needed):</b>				
	<b>Name</b>	<b>Title</b>	<b>Ethnicity</b>	<b>Gender</b>
(1) Financial Decisions /Transactions ( <i>responsibility for acquisition of lines of credit, surety bonding, supplies, etc.</i> )				<input type="checkbox"/> M <input type="checkbox"/> F
(2) Estimating/Bidding				<input type="checkbox"/> M <input type="checkbox"/> F
(3) Negotiating/Contract Execution				<input type="checkbox"/> M <input type="checkbox"/> F
(4) Hiring/Firing of management personnel				<input type="checkbox"/> M <input type="checkbox"/> F
(5) Field/Production Operations Supervisor				<input type="checkbox"/> M <input type="checkbox"/> F
(6) Office management				<input type="checkbox"/> M <input type="checkbox"/> F
(7) Marketing/Sales				<input type="checkbox"/> M <input type="checkbox"/> F
(8) Purchasing of major equipment				<input type="checkbox"/> M <input type="checkbox"/> F
(9) Authorized to Sign Company Checks (for any purpose)				<input type="checkbox"/> M <input type="checkbox"/> F
(10) Determine jobs firm will take				<input type="checkbox"/> M <input type="checkbox"/> F
(11) Do any of the persons listed in (1) through (10) above perform a management or supervisory function for any other business? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
Person Name	Title	Business	Function	

## FIVE YEAR M/WBE RENEWAL APPLICATION

(12) Do any of the persons listed in (1) through (10) above own or work for any other firm(s) that has a relationship with this firm (e.g., ownership interest, shared office space, financial investments, equipment, leases, personnel sharing, etc.)? If Yes, identify for each:			<input type="checkbox"/> No	<input type="checkbox"/> Yes
Firm Name	Name of Person	Nature of Business Relationship		

**C. Indicate your firm's inventory in the following categories (attach additional sheets if needed):**

Equipment			
Type of Equipment	Make/Model	Current Value	Owned or Leased?
(a)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(b)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(c)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased

Vehicles			
Type of Vehicle	Make/Model	Current Value	Owned or Leased?
(a)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(b)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased
(c)			<input type="checkbox"/> Owned <input type="checkbox"/> Leased

Office Space		
Street Address	Owned or Leased?	Current Value of Property or Lease
(a)		
(b)		

Storage Space		
Street Address (If located at different address than listed above)	Owned or Leased?	Current Value of Property or Lease
(a)	<input type="checkbox"/> Owned <input type="checkbox"/> Leased	
(b)	<input type="checkbox"/> Owned <input type="checkbox"/> Leased	

<b>D. Does your firm rely on any other firm for management functions or employee payroll?</b> If Yes, explain:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
---	-----------------------------	------------------------------

E. Financial Information			
(1) Banking Information:			
(a) Name of Bank:	(b) Telephone Number:		
(c) Address of Bank:			
City:	State:	Zip Code:	
(2) Bonding Information:			
If you have bonding capacity, identify:	(a) Binder No:		
(b) Name of Agent/Broker:	(c) Telephone Number:		
(d) Address of Agent/Broker:			
City:	State:	Zip Code:	
(e) Bonding limit: Aggregate Limit	\$	Project Limit	\$

## FIVE YEAR M/WBE RENEWAL APPLICATION

**F. Identify all sources, amounts, and purposes of money loaned to your firm, including the names of any persons or firms securing the loan, if other than the listed owner (attach additional sheets if needed):**

Name of Source	Address Of Source	Name of Person Securing Loan	Original Amount	Current Balance	Purpose Of Loan
1.					
2.					
3.					

**G. List all contributions or transfers of assets to/from your firm and to/from any of its owners over the past two years (attach additional sheets if needed):**

Contribution/Asset	Dollar Value	From Whom Transferred	To Whom Transferred	Relationship	Date of Transfer
1.					
2.					
3.					

**H. List current licenses/permits held by any owner and/or employee of your firm (e. g. contractor, engineer, architect, etc.) (Attach additional sheets if needed):**

Name of License/Permit Holder	Type of License/Permit	Expiration Date	License Number & State
1.			
2.			
3.			
4.			

**I. List the three largest contracts completed by your firm in the past three years, if any:**

Name of Owner/Contractor	Name/Location of Project	Type of Work Performed	Dollar Value of Contract
1.			
2.			
3.			

**J. List the three largest active jobs on which your firm is currently working:**

Name of Prime Contractor & Project Number	Location of Project	Type of Work	Project Start Date	Anticipated Completion Date	Dollar Value of Contract
1.					
2.					
3.					



# FIVE YEAR M/WBE RENEWAL APPLICATION

## MBE/WBE AFFIDAVIT OF CERTIFICATION

*This form must be signed and notarized for each owner upon which minority and/or women status is relied.*

**A MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR DENIAL OF CERTIFICATION, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS, AND MAY SUBJECT THE PERSON AND/OR ENTITY MAKING THE FALSE STATEMENT TO ANY AND ALL CIVIL AND CRIMINAL PEALTIES AVAILABLE PURSUANT TO APPLICABLE FEDERAL AND STATE LAW.**

I \_\_\_\_\_ (full name printed), swear or affirm under penalty of law that I am \_\_\_\_\_ (title) of applicant firm \_\_\_\_\_ (firm name) and that I have read and understood all of the questions in this application and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are true and correct to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information. The responses include all material information necessary to fully and accurately identify and explain the operations, capabilities and pertinent history of the named firm as well as the ownership, control, and affiliations thereof.

I recognize that the information submitted in this application is for the purpose of inducing certification approval by a government agency. I understand that a government agency may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, and the named firm's bonding companies, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named firm's eligibility.

I agree to submit to government audit, examination and review of books, records, documents and files, in whatever form they exist, of the named firm and its affiliates, inspection of its places(s) of business and equipment, and to permit interviews of its principals, agents, and employees. I understand that refusal to permit such inquiries shall be grounds for denial of certification.

If awarded a contract or subcontract, I agree to promptly and directly provide the prime contractor, if any, and the City of St. Louis on an ongoing basis, current, complete and accurate information regarding (1) work performed on the project; (2) payments; and (3) proposed changes, if any, to the foregoing arrangements.

I agree to provide written notice to the City of St. Louis of any material change in the information contained in the original application within 30 calendar days of such change (e.g., ownership, address, telephone number, etc.).

I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for terminating any contract or subcontract which may be awarded; denial or revocation of certification; suspension and debarment; and for initiating action under federal and/or state law concerning false statement, fraud or other applicable offenses.

I certify that I am a minority and/or woman individual who is an owner of the above-referenced firm seeking certification as a Minority Business Enterprise (WBE) and/or Women Business Enterprise (WBE). In support of my application, I certify that I am a member of one or more of the following groups, and that I have held myself out as a member of the group(s) (circle all that apply):

I declare, under penalty of perjury, that the information provided in this application and supporting documents is true and correct.

*Signature		*Signature	
Printed name		Printed name	
Title		Title	
Date		Date	

**\*Must be signed by the individual or individuals asserting minority or women.  
NOTARY PUBLIC**

On this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_ before me appeared \_\_\_\_\_

and \_\_\_\_\_ who, being duly sworn, did execute the foregoing affidavit, and did state they were properly authorized by the above-named MBE and /or WBE firm to execute this affidavit, and that they did so as their free act and deed.

Signed \_\_\_\_\_ Notary Public

My Commission expires:

# FIVE YEAR M/WBE RENEWAL APPLICATION

## MBE/WBE CERTIFICATION APPLICATION SUPPORTING DOCUMENTS CHECKLIST

You must include all of the appropriate documentation (listed below) with your application for MBE/WBE certification, and attach copies of all of the required documents listed below, as they apply to you and your firm. **Failure to submit a complete application package will result in delays and/or denial of certification.**

### **All Applicants**

- ☐ Work experience resumes (that include places of ownership/employment with corresponding dates), for all owners and officers of your firm
- ☐ Your firm's tax returns (gross receipts) and all related schedules for the past three years
- ☐ Documented proof of contributions used to acquire ownership for each owner (*e.g. both sides of cancelled checks*)
- ☐ Your firm's signed loan agreements, security agreements, and bonding forms
- ☐ Descriptions of all real estate (including office/storage space, etc.) owned/leased by your firm and documented proof of ownership/signed leases
- ☐ List of equipment leased and signed lease agreements
- ☐ List of construction equipment and/or vehicles owned and titles/proof of ownership
- ☐ Documented proof of any transfers of assets to/from your firm and/or to/from any of its owners over the past two years
- ☐ Year-end balance sheets and income statements for the past three years (*or life of firm, if less than three years*); a new business must provide a current balance sheet
- ☐ All relevant licenses, license renewal forms, permits, and haul authority forms
- ☐ DBE/MBE/WBE and SBA 8(a) or SDB certifications, denials, and/or de-certifications, if applicable
- ☐ Bank authorization and signatory cards
- ☐ Schedule of salaries (or other compensation or remuneration) paid to all officers, managers, owners, and/or directors of the firm
- ☐ Trust agreements held by any owner claiming disadvantaged status, if any
- ☐ Executed contracts, agreements, work orders, etc. (provide at least three)

### **Sole Proprietorship**

- ☐ Fictitious Name Registration(s)

### **Partnership or Joint Venture**

- ☐ Original and any amended Partnership or Joint Venture Agreements

### **Corporation or LLC**

- ☐ Official Articles of Incorporation (*signed by the state official*)
- ☐ Both sides of all corporate stock certificates and your firm's stock transfer ledger
- ☐ Shareholders' Agreement
- ☐ Minutes of all stockholders and board of directors meetings
- ☐ Corporate by-laws and any amendments
- ☐ Corporate bank resolution and bank signature cards
- ☐ Official Certificate of Formation and Operating Agreement with any amendments (for LLCs)

### **Trucking Company**

- ☐ Documented proof of ownership of the company
- ☐ Insurance agreements for each truck owned or operated by your firm
- ☐ Title(s) and registration certificate(s) for each truck owned or operated by your firm
- ☐ List of U.S. DOT numbers for each truck owned or operated by your firm

### **Regular Dealer**

- ☐ Proof of warehouse ownership or lease
- ☐ List of product lines carried
- ☐ List of distribution equipment owned and/or leased

**Submit this checklist along with the certification application and the documentation listed above to the DBE Program Office, Lambert St. Louis International Airport, P. O. Box 10212, St. Louis, MO 63145.**

**CITY OF ST. LOUIS  
BOARD OF PUBLIC SERVICE**

**NOTICE OF INTENT TO PERFORM AS A SUBCONTRACTOR AND/OR MATERIAL  
SUPPLIER**

NAME OF PROJECT \_\_\_\_\_

LETTING NUMBER \_\_\_\_\_

**PART I**

(NOTE: Pursuant to the City's policies, M/WBE firms participating in the City's M/WBE Program must have "current" certification status with the City or the Missouri Regional Certification prior to bid opening. The M/W/DBE certification of any firm is effective for two (2) years from the date of written notification of certification. Firms not certified by the City or the Missouri Regional Certification cannot be counted towards the City's M/WBE goals on this project. Firms certified by the U.S. Small Business Administration (SBA) must attach a copy of a the firm's 8(a) program approval letter from the SBA)

1. TO: \_\_\_\_\_  
(Name of Contractor)

2. The undersigned intends to perform work in connection with the above project as (check one):

an individual / sole proprietorship  
a corporation

a partnership  
a joint venture

3. The undersigned (check applicable statements):

has been certified by the St. Louis Airport Authority (SLAA)  
(Certification # \_\_\_\_\_).

has been certified as a DBE by the Missouri Regional Certification Committee.  
Certification # \_\_\_\_\_.

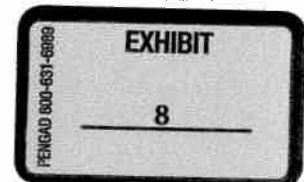
has a current 8(a) status with the U.S. Small Business Administration.

4. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply" or "install" or both).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

and at the following price \$ \_\_\_\_\_. With respect to the proposed subcontract described above  
\_\_\_\_\_% of the dollar value of such subcontract will be sublet and/or awarded to non-M/W/DBE  
subcontractors.

M/WBE - 5



Letting No. \_\_\_\_\_

**CITY OF ST. LOUIS  
BOARD OF PUBLIC SERVICE  
MBE/WBE UTILIZATION STATEMENT**

**Policy:** It is the policy of the City of St. Louis that minority and women-owned businesses, as defined in the Mayor's Executive Order of July 24, 1997, shall have an opportunity to participate in the performance of contracts utilizing City funds, in whole or in part. Consequently, the requirements of the aforementioned Executive Order apply to this contract.

**Project and Bid Identification:**

Contracting Agency: \_\_\_\_\_

Project Name: \_\_\_\_\_

Letting Number: \_\_\_\_\_ Date: \_\_\_\_\_

Contract MBE/WBE Goal: 25% MBE and 5% WBE Participation

Total Dollar Amount of Prime Contract: \$ \_\_\_\_\_

Total Dollar Amount of Proposed MBE: \$ \_\_\_\_\_ Percent MBE \_\_\_\_\_

Total Dollar Amount of Proposed WBE: \$ \_\_\_\_\_ Percent WBE \_\_\_\_\_

**Obligation:** The undersigned certifies that (s)he has read, understands and agrees to be bound by the bid specifications, including the accompanying exhibits and other items and conditions of the request for proposals regarding minority and women business enterprise utilization. The undersigned further certifies that (s)he is legally authorized by the respondent to make the statements and representations in the M/WBE Forms and Exhibits and that said statements and representations are true and correct to the best of his/her knowledge and belief. The undersigned will enter into formal agreements with the minority/women business enterprises listed in the Subcontractor List, which are deemed by the City to be legitimate and responsible. The undersigned understands that if any of the statements and representations are made by the respondent knowing them to be false, or if there is a failure of the successful respondent to implement any of the stated agreements, intentions, objectives, goals and commitments set forth herein without prior approval of the City, then in any such events, the contractor's act or failure to act, as the case may be, shall constitute a material breach of the contract, entitling the City to terminate the contract for default. The right to so terminate shall be in addition to, and not in lieu of, any other rights and remedies the City may have for other defaults under the contract. Additionally, the contractor may be subject to the penalties cited in Section Twelve of the Mayor's Executive Order #28

**Assurance:** I, acting as an officer of the undersigned bidder or joint venture bidders, hereby assure the City that on this project my company will (check one):

- \_\_\_\_\_ Meet or exceed contract award goals and provide participation as shown above.  
\_\_\_\_\_ Fail to meet contract award goals but will demonstrate that good faith efforts were made to meet the goals and my company will provide participation as shown above.

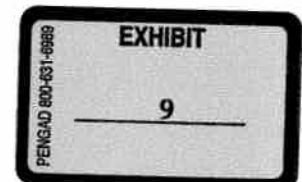
Name of Prime Contractor(s): \_\_\_\_\_

Prime Contractor Authorized Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

M/WBE I



ST. LOUIS DEVELOPMENT CORPORATION  
OFFICE OF CONTRACT COMPLIANCE

NOTICE OF INTENT TO PERFORM AS A SUBCONTRACTOR AND/OR MATERIAL SUPPLIER

NAME OF PROJECT \_\_\_\_\_

LETTING NUMBER \_\_\_\_\_

PART I

(NOTE: Pursuant to the City's policies, M/WBE firms participating in the City's M/WBE Program must have "current" certification status with the City prior to bid opening. The M/W/DBE certification of any firm is effective for two (2) years from the date of written notification of certification. Firms not certified by the City can not be counted towards the City's M/WBE goals on this project. Firms certified by the U.S. Small Business Administration (SBA) must attach a copy of a the firm's 8(a) program approval letter from the SBA)

1. TO: \_\_\_\_\_  
(Prime Contractor)
2. The undersigned intends to perform work in connection with the above project as (check one):  

<input type="checkbox"/> an individual / sole proprietorship	<input type="checkbox"/> a partnership
<input type="checkbox"/> a corporation	<input type="checkbox"/> a joint venture
3. The undersigned (check applicable statements):  

<input type="checkbox"/> has been certified by the St. Louis Development Corporation (SLDC) (Certification # _____).
<input type="checkbox"/> has been certified by the St. Louis Airport Authority (SLAA) (Certification # _____).
<input type="checkbox"/> has a current 8(a) status with the U.S. Small Business Administration.
4. The undersigned is prepared to perform the following described work and/or supply the material listed in connection with the above project (where applicable specify "supply" or "install" or both.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

and at the following price \$ \_\_\_\_\_. With respect to the proposed subcontract described above  
\_\_\_\_\_% of the dollar value of such subcontract will be sublet and/or awarded to non-M/W/DBE subcontractors.  
M/WBE 2

**PART II: SUBCONTRACTOR PARTICIPATION**

4b	Name of Firm Receiving Subcontract	Work to Be Performed	Amount of Subcontract
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Total amount to be subcontracted out by M/WBE \$\_\_\_\_\_

\_\_\_\_\_  
(Name of General Contractor) BY: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATE: \_\_/\_\_/\_\_\_\_  
(Signature of Authorized Representative)

\_\_\_\_\_  
(Name of M/W/DBE Firm) BY: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATE: \_\_/\_\_/\_\_\_\_  
(Signature of Authorized Representative)

M/WBE - 6

CITY OF ST. LOUIS  
BOARD OF PUBLIC SERVICE  
CONTRACTOR'S GOOD FAITH EFFORTS REPORT

CONTRACTING AGENCY: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

PRIME CONTRACTOR: \_\_\_\_\_

In addition to the minority or women-owned business enterprises listed and proposed for utilization on this contract, the following minority and women-owned business enterprises were also contacted regarding this contract. However, the prime contractor is unable to utilize these firms for the reasons listed below:

FIRM NAME ADDRESS, PHONE # CONTACT PERSON	BID ITEM(S) OF WORK TO BE PERFORMED AND/OR MATERIALS SUPPLIED	BID AMOUNTS	DATE AND METHOD OF SOLICITATION	COMMENTS: REASONS REJECTED

Prime Contractor's Authorized Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Note: Attach additional sheets if necessary.  
MWB-7

**CITY OF ST. LOUIS  
BOARD OF PUBLIC SERVICE  
CONTRACTOR'S GOOD FAITH EFFORTS STATEMENT**

In accordance with the Mayor's Executive Order of July 24, 1997, please indicate those efforts you made to regarding the utilization of minority and/or women-owned business enterprises (M/WBEs) on this contract.

	YES	NO
Attended the pre-bid conference held on this contract.		
Selected portions of work proposed to be performed by M/WBEs in order to increase the likelihood of meeting the participation goals.		
Solicited individuals M/WBEs by written notification at least fourteen (14) calendar days prior to bid opening to participate in the contract as subcontractor, regular dealer, manufacturer, consultant, or service agency for specific items or type of work.		
Followed up the initial solicitation of interest by contacting M/WBE firms to determine whether or not said firms will submit a bid.		
Provided interested M/WBE firms with adequate information regarding plans, specifications and requirements for bidding on City-financed construction		
Negotiated in good faith with M-WBE firms. Firms shall not be disqualified without sound reasons based upon a thorough investigation of their capabilities.		
Made efforts to negotiate with M/WBE firms for specific items of work.		
Made efforts to assist M/WBE firms that requested assistance in obtaining bonding, insurance, or lines of credit required to participate in the contract.		
Advertised in general circulation media, trade association publication(s), M/WBE-focused media for M/WBEs and areas of interest for this contract.		
Name of Publication(s)	1. Date	3. Date
	2. Date	4. Date
Notified, in writing, organizations which provide assistance in the recruitment and placement of M/WBE firms of the types of work, supplies or services considered on this contract. List the organizations, contractors' groups, local, state and federal disadvantaged business assistance offices and other organizations that were contacted for assistance in achieving the participation of M/WBE firms on this contract.		
Please note the name of the person contacted and the date of contact.		
Organization	Contact Person	Date of Contact
Organization	Contact Person	Date of Contact
Organization	Contact Person	Date of Contact

Firm Name

Prime Contractor's Authorized Signature

Title

Date



**CITY OF LOUIS  
BOARD OF PUBLIC SERVICE  
SUBCONTRACTOR LIST**

Prior to the final approval of any contract resulting from this letting, the apparent low bidder will be evaluated as to the proposed utilization of City certified minority and women-owned business enterprises. This is in addition to any and all requirements in accordance with the Mayor's Executive Order of July 24, 1997. On the spaces provided below please list all subcontractors and suppliers, including M/WBEs, proposed for utilization on this project. Work to be self-performed by the bidder is to be included.

[illegible]

M/WBE -2

...

$$r = \frac{1}{\sqrt{2}}$$

j.

**CITY OF LOUIS  
BOARD OF PUBLIC SERVICE  
SUBCONTRACTOR LIST**

FIRM NAME	MBE or WBE	BID ITEM(S) OF WORK TO BE PERFORMED	SUBCONTRACT OR SUPPLY CONTRACT AMOUNT

CONTRACT BID TOTAL    \$ \_\_\_\_\_

TOTAL AMOUNT OF MBE PARTICIPATION: \_\_\_\_\_

PERCENT MBE PARTICIPATION: \_\_\_\_\_

TOTAL AMOUNT OF WBE PARTICIPATION: \_\_\_\_\_

PERCENT WBE PARTICIPATION: \_\_\_\_\_

In considering all levels of subcontracting on City contracts the following categories of Bid Item(s) or Work and Trade have been suggested by various private and governmental organizations and professional groups involved in commercial and industrial construction: -- air conditioning, final clean-up, caulking, ceilings, conduit, concrete, cement, cabinets, doors, drainage, drilling, drywall, asphalt, carpentry, communications, electrical, equipment rental, excavating, elevators, earthwork, decorators, fencing, flooring, automatic sprinklers, foundations, brick masonry, pile caps, pile driving, sewers, stone masonry, insulation, tile setting and terrazzo, lathing and plastering, asbestos painting, security guard service, sign painting, painting, insurance and bonding, photographers, plumbing, paving, grading, landscaping, toilet partitions, siding, roof decking, flooring, paperhangers, sky lights, steel erections, re-bar, sheet metal, movable partitions, ornamental iron, glazing, accessories suppliers, exterminators, millwork, wall covering, advertisers, data programmers, wrecking and demolition, sodding, construction and design consultants, hauling, financing institutions, public movers, specialties, carpeting, piping, heating, and sanitary and safety facilities.

**Note: On attached sheets, provide the complete mailing address, telephone number, contact person and title for each firm listed on the previous pages. Additionally, provide the City Business License Number and Federal Identification Number for each.**

\_\_\_\_\_  
Name of Firm

\_\_\_\_\_  
Signature and Date

M/WBE -4



LAMBERT-ST. LOUIS  
INTERNATIONAL AIRPORT

Rhonda Hamm-Niebruegge  
Director



Francis G. Slay  
Mayor - City of St. Louis

## CITY OF ST. LOUIS APPLICATION FOR WAIVER

As you know, this project is subject to the Order. Per the Mayor's Executive Order #28, as amended, if a prime contractor's MBE/WBE Utilization Plan does not indicate intent to utilize a minimum of 25% MBE participation and 5% WBE participation, the contractor shall request a waiver from the contracting agency. A waiver from meeting the 25% MBE and 5% WBE goals, or some portion of them, will be granted when the bidder submits evidence that it has exhausted all available resources in locating and soliciting bids or proposals from minority and women businesses and has found it impossible to meet the established goals.

*Your application for waiver shall include full documentary evidence of your good faith efforts to meet the goals prior to bid opening and why the request for waiver should be granted. Your request shall be in writing, must include a narrative, affidavits or exhibits which verify the actions taken by you the general contractor to meet the MBE/WBE goals and submitted within five-(5) calendar days.*

*Please submit your request for waiver to:*  
**City of St. Louis-Board of Public Service**  
**ATTN: Richard Bradley-President of the Board of Public Service**  
**1200 Market, Room 305**  
**St. Louis, Missouri 63103**

Project Name: \_\_\_\_\_

Bid Date: \_\_\_\_\_

Bid Amount: \_\_\_\_\_

Name of General Contractor: \_\_\_\_\_

Representative for General Contractor  
(Include Name & Phone Number): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_

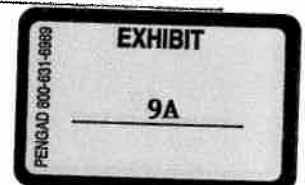
Email: \_\_\_\_\_

### MBE/WBE Data

Proposed MBE Participation \_\_\_\_\_  
MBE: Partial Waiver ( ) Total Waiver ( )

Proposed WBE Participation \_\_\_\_\_  
WBE: Partial Waiver ( ) Total Waiver ( )

Justification for Waiver Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**CITY OF ST. LOUIS**  
**APPLICATION FOR WAIVER**  
**Documentary of Good Faith Efforts**

Please provide (on a separate sheet) narrative as well as copies of affidavits, exhibits, logs, MBE/WBE and Non MBE/WBE bids, etc. of the following demonstrating good faith efforts employed to achieve the goals.

*(The following is a non-mandatory, non-exhaustive, non-exclusive list of types of actions that, together with the personal, frequent and persistent contact described in the Rules, the Authority may consider as evidence of good faith efforts to obtain MBE/WBE participation. Other factors may be relevant depending on the nature of the contract and the types of work involved.)*

1. Solicitations to MBEs/WBEs (media types, dates, etc.)
2. Contact and follow-up (telephone calls, faxes and emails received and returned)
3. MBE Contacts
4. Mail, Fax and Email Distributions to MBEs/WBEs
5. Plan Room Deliveries and Dates
6. Subcontract Package Break-downs
7. Technical Assistance Offered/Provided
8. Invitations to M/WBEs to Review plans and Specs
9. Bids Received

1.000000

# PROJECT NAME:

DATA:

1. CONTRACT APPLICATION NUMBER						
PROPOSED SUBCONTRACTOR OR SUPPLIER	MBE or WBE	PROPOSED SUBCONTRACT AMOUNT	SUBCONTRACTOR OR VENDOR BILLED THIS PAY APPLICATION	PREVIOUS PAYMENTS TO SUBCONTRACTOR OR VENDOR	TOTAL PAYMENTS TO SUBCONTRACTOR TO DATE	SUBCONTRACTOR OR VENDOR PERCENT COMPLETE

Prime Contractor's Authorized Signature

7-21-64

CONTRACT NUMBER  
PROJECT NAME  
PRIME CONTRACTOR

SUBCONTRACTOR/SUPPLIER

[illegible]

Signature

NWBE 5



ST. LOUIS DEVELOPMENT CORPORATION  
OFFICE OF CONTRACT COMPLIANCE  
MONTHLY MANPOWER REPORT

PROJECT NAME  
CONTRACT NUMBER  
PRIME CONTRACTOR

DATE  
PERIOD COVERED

EMPLOYEE NAME	ADDRESS	CITY RESIDENT	RACE	SEX
---------------	---------	---------------	------	-----



PROBING ZEPHYRUS

### MWB GOAL:

FINAL CONTRACT AMOUNT:

<p>The Final Record of Payments Report is completed by the contractor and submitted to the contracting agency and SLAA upon completion of the project. The report should reflect all activity, regardless of tier, on the project. If the M/WBE goal was not met, the contractor shall submit documentation supporting good faith efforts.</p>		<p>FINAL CONTRACT AMOUNT:</p> <p>(Including Change Orders to Date)</p>
<p>SLAB CONTRACTOR OR SUPPLIER</p>	<p>Address:</p>	

[illegible]

This certifies that \$ \_\_\_\_\_ has been paid to M/W/BE Subcontractors or Suppliers as stated above.

By:

Name of Contractor

Per:

**Authorized Signature**

ix Public:

day of

My commission expires:



PROJECT NAME: \_\_\_\_\_

ST. LOUIS DEVELOPMENT CORPORATION  
OFFICE OF CONTRACT COMPLIANCE  
FINAL UTILIZATION REPORT

CONTRACT NUMBER: \_\_\_\_\_

MBE GOAL: \_\_\_\_\_  
WBE GOAL: \_\_\_\_\_  
FINAL CONTRACT AMOUNT: \_\_\_\_\_

The Final Record of Payments Report is completed by the contractor and submitted to the contracting agency and SLDC upon completion of the project. The report should reflect all activity, regardless of tier, on the project. If the M/WBE goal was not met, the contractor shall submit documentation supporting good faith efforts.

SUBCONTRACTOR OR SUPPLIER	MBE WBE	WORK PERFORMED	TOTAL DOLLAR AMOUNT PAID TO SUBCONTRACTOR OR SUPPLIER

This certifies that \$ \_\_\_\_\_ has been paid to M/WBE Subcontractors or Suppliers as stated above.

By: \_\_\_\_\_

Name of Contractor

Per: \_\_\_\_\_

Authorized Signature

day of \_\_\_\_\_

Notary Public: \_\_\_\_\_

A.D. \_\_\_\_\_

My commission expires: \_\_\_\_\_

M/WBE 7

